

Risk Management Matrix 2020-21

The Matrix was last reviewed February 2021

Amended November 2021





| Conte | ents |
|-------|---------------------------|
| А | Introduction |
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A. Introduction

Regulatory Requirements

Paragraph 45 of the Charities SORP 2005 requires that the annual report contains a statement confirming that "the major risks, to which the charity is exposed, as identified by the trustees, have been reviewed and systems or procedures have been established to manage those risks"

Under Regulation 7, the Board Members of Healthwatch Shropshire must at least make a statement that they have "given consideration" to:

- The major risks to which the charity is exposed; and
- Systems designed to mitigate those risks

Purpose of this document

This document sets out the key external risks, both financial and non-financial, as assessed by the Board Members and employees This document is revisited on a regular basis

The relative importance of each of the risks identified has been assessed through consideration of the likelihood of incidence and the potential impact on Healthwatch Shropshire

Controls in place, which mitigate the risks identified, have been recorded along with the names of the individuals' assigned responsibility for the operation and monitoring of those controls

In cases where further action is required, the steps to be taken have been recorded



The risks can be registered as:

Risk Impact - low medium or high or 1, 2 or 3

Risk Likelihood - low medium or high or 1, 2 or 3

The overall relative importance of the risk is

Green - low risk

<u>Amber</u>-medium risk

Red - high risk

And is shown in the table below:

| Impact | Low / 1 | Medium / 2 | High /3 |
|------------|---------|------------|---------|
| Likelihood | | | |
| Low / 1 | 1 | 2 | 3 |
| Medium /2 | 2 | 4 | 6 |
| High / 3 | 3 | 6 | 9 |

Each section of the Risk Matrix below identifies the risks that Healthwatch Shropshire is exposed to and the assessment of that risk



There is a risk that...

| B. MISSION/OBJECTIVES | | | | | | | | | | |
|--|--|---|---|------------------------------|----------------------------|----------------------------|-------------|--|--|--|
| Risk Factor | Risk Likelihood (low, medium or high) | Risk Impact (low, medium or high) | Control Procedure | Individual Responsibility | Monitoring Process | Further Action Required | Risk Rating | | | |
| 1 The objectives of the charity may restrict HWS | Low | Medium | Articles reviewed annually as a minimum, or as appropriate, to ensure they meet current needs | Board and Chair | Business Committee | | | | | |
| Activities & future development | | | for the organisation | | Annual Report to the Board | | | | | |





| Risk Factor | Risk Likelihood (low, medium or high) | Risk Impact (low, medium or high) | Control Procedure | Individual Responsibility | Monitoring Process | Further Action Required | Risk Rating |
|---|--|---|---|---|--|--|-------------|
| 1 Following a monitoring visit from the Charity Commission an adverse report is received | Low | High | Compliance with Charity Commission standards and requirements Board to review compliance with the audit process of the Charity Commission | Board & Chief Officer | Business Committee Annual report to the Board | | |
| 2 Failure to comply with annual reporting requirements of Healthwatch England, Charity Commission and Companies House | Low | Medium | Board to receive and approve the Annual Report in a timely manner | Board & Chief Officer | Development of the annual timetable | Year-end plan agreed and annual report to be approved by the Board | |
| 3 Failure to comply with requirements of HRMC | Low | High | Minimum bi-monthly meetings with the Finance Officer Finance Officer reports to Business Committee, quarterly | Board & Chief Officer | Monthly financial reporting | | |
| 4 Failure to comply with the requirements of GDPR | Low | High | Minimum of annual review to relevant policy and procedures Annual audit by nominated Data Protection Officer | Board, Chief Officer & Information Officer | IO reviews spreadsheet | All new staff to complete the Health Education England Data Security Awareness - Level 1 course. Refresher | |





| D. GOVERNAN | CF & MANA | GEMENT | | | | training every 2 years | |
|---|---------------------------------------|---|--|---------------------------------|--|------------------------------|-------------|
| Risk Factor | Risk Likelihood (low, medium or high) | Risk Impact (low, medium or high) | Control Procedure | Individual Responsibility | Monitoring Process | Further Action Required | Risk Rating |
| 1 Failure to meet HWS contractual requirements with our Commissioners | Low | High | Quarterly meetings with the Commissioning manager | Chief Officer | Quarterly review of performance at the Business Committee and Board | | |
| 2 The organisation becomes dysfunctional due to a breakdown in relationships and/or competence of individuals | Low | High | Clear Board Member roles Formal lines of communication are clearly understood and documented Annual joint meeting of Board Members and staff Attendance of a Board Member at Staff Away Day/s Documented management meetings, appraisals and performance reviews Procedural framework for meetings and recording decisions Authority of the Chair upheld by the Board Rigorous recruitment, on-going training and professional development, exit interviews | Chair, Board & Chief Officer | Business Committee to monitor Exception reporting to the Board Review by Chair Appraisal process for Chief Officer and team Board Members to complete an evaluation of the working of the Board on an annual basis | Completed in Q2 (2019-20) | |



| Risk Factor | Risk Likelihood (low, medium or high) | Risk Impact (low, medium or high) | Control Procedure | Individual Responsibility | Monitoring Process | Further Action Required | Risk Rating |
|---|--|---|---|---------------------------------|---|---|-------------|
| 3 A conflict of interest of a board or staff member, or volunteer, harms the organisation | Low | Medium | Protocol for disclosure of potential conflicts of interest in Board Member, volunteer and Staff handbooks Recruitment and selection processes require any conflicts of interest to be declared | Board Chair Chief Officer | Protocols clearly communicated in staff, volunteer and board member recruitment and induction documentation | Board member and staff handbook to be finalised Code of conduct to be recirculated | |
| 4 There is a failure to maintain confidentiality | Low | High | Confidentiality Policy in place Ensure everyone is trained and maintains ongoing awareness | Chief Officer | Review Confidentiality policy, annually Review induction processes, (in line with policy) | On-going monitoring | |
| 5. Failure to recruit to the Board as members reach the end of their term of office | High | Medium | Team to continue to promote Board membership amongst volunteers and to the public Consider revision of Articles to extend number of terms of office | Chief Officer | Review Articles | Advertise Board membership when doing staff recruitment | |





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|---|--|---|--|------------------------------|--|----------------------------|-------------|
| 1 Change in national and/or local political regime or policies will have an adverse impact on HWS | Medium | High | Agreed work plan with Local Authority reviewed on a quarterly basis with commissioning officer Maintain good working relationship with local authority Keep up to date with relevant information from HWE and national press | Chief Officer | Strategic plan, annual review Chief Officer report to Board, quarterly | On-going monitoring | |
| 2 There is a risk that a strategic change in social care policies will adversely impact the delivery of HWS work | Medium | High | Develop effective working relationships with local politicians and local authority officers CQC Contribute through the Health & Wellbeing Board | Chief Officer | Strategic plan, annual review Chief Officer report to Board, quarterly | On-going monitoring | |
| 3 There is a risk that a strategic change in health care will adversely impact the delivery of HWS work | High | High | As above but with NHS & Local Politicians CQC Contribute through the Health & Wellbeing Board | Chief Officer | On-going engagement | On-going monitoring | |





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| 3 a Risk that HWS is unable to respond to pressures of local transformation plans, creating a potential negative risk to HWS | High | High | Monitor HWS engagement in the transformation plan Ensure that HWS is engaged at all levels | Chair and Chief Officer | On-going review | | |
| 4 Risk that Healthwatch is excluded from key committees | Medium | High | Engaging and relationships with key individuals | Chief Officer | On-going engagement Chief Officer to report to Board | | |
| 4a Risk that Healthwatch is excluded from key information | Low (has happened early on in Covid) | High | Maintaining awareness of local context Meetings with key organisations and individuals | Chair & Chief Officer | On-going engagement Chief Officer to report to Board | | |
| 5 Lack of public awareness of HWS and its impact leads to lack of public engagement | Medium | High | Marketing & engagement plan Marketing Committee quarterly monitor and review Annual Report & published reports (press releases) | Chief Officer and Community Engagement Officer | Marketing Committee to report to Board | Continue to review | |
| 6 Negative public perception of HWS leads to lack of public engagement | Low | Medium | Marketing & engagement plan, a quarterly monitor and review Demonstration of impact – "You said, We did report" | Chief Officer and Community Engagement Officer | Chief Officer/ Marketing group report to Board | Continue to review | |





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|---|--|---|--|---|---|---------------------------------------|-------------|
| 7 Lack of public interest in HWS and its impact leads to lack of public engagement | Medium | Medium | Marketing & engagement plan, a quarterly monitor and review Demonstration of impact – "You said, We did report" | Chief Officer and Community Engagement Officer Information Officer | Chief Officer report to Board | Continue to review | |
| 8 Excessive workload is experienced by HWS staff | High | High | Internal support mechanisms Staff development in prioritisation skills Critical appraisal of new business | Chief Officer | Regular review through Business Committee | Volunteer recruitment on- going | |
| 9 Failure of key software/hardware | Low | High | Robust back up procedures, Maintenance and support contracts, Disaster and recovery procedures- all monitored & implement by Shropshire RCC Insurance | Chief Officer | Annual review | | |
| 10 Unforeseen event, e g adverse weather conditions, IT systems failure, staff sickness, pandemic | Low | Medium | Access to building kept under review Business Continuity Plan/Contingency Plan/Disaster Recovery Policy Insurance in place for insurable risks | Board | Annual Review | | |





| Risk Factor | Risk Likelihood | Risk Impact (low, medium | Control Procedure | Individual Responsibility | Monitoring Process | Further Action Required | Risk Rating |
|--|-----------------------|-----------------------------|--|------------------------------|---|----------------------------|-------------|
| | (low, medium or high) | or high) | | | | | |
| 1 Reputational and financial impact of event, fraud, legal challenge, accident, media coverage etc | Medium | High | Finance Policy and internal financial control procedures Appropriate Policies and procedures including Health & Safety, Child Protection, Adult Protection, Data Protection, Confidentiality Insurance Cover Contract with Acton Jennings for Health Safety and Personnel Support Complaints procedures (internal and external) On-going supervision and clear lines of roles and responsibilities for all staff, trustees and volunteers Media Relations Policy | Chief Officer | Annual Review, minimum quarterly Board meetings | | |
| 2 Supplier dependency, bargaining power | Low | Low | Financial Systems Policy Contracts in place for all key suppliers and consultants Credit checks for critical suppliers References Use of buying options Market testing | Chief Officer | Annual Review | | |



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|--|--|---|---|---|---|----------------------------|-------------|
| 3 Physical security jeopardised or abuse of staff occurs | Low | High | Secure door entry system, and burglar alarm Fire detection system Business Continuity policy to address Terrorist threats Asset Register Regular risk assessment and appropriate control procedures including lone working and appropriate training put in place Training and supervision procedures Health & Safety Policy | Chief Officer | H&S Annual Review | | |
| 4 Data Security, including GDPR requirements | Low | High | Data Protection, Confidentiality policy Training of staff and volunteers Appropriate physical security measures Appropriate electronic security measures Keeping up to date with legislation and guidance | Chief Officer and Information Officer | Review policies as required, at minimum annually | | |



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| 5 a) Competition from other bodies results in loss of contract or lowering of reputation | Low | High | Membership of strategic partnerships and alliances Working in partnership with key organisations Spread of financial risks Competition and Collaboration agreement with other LHW | Chief Officer | Strategic plan, annual review CO report to Board | Continued awareness of competitive environment | |
| 5 b) Competition from other bodies results in loss of total contract | Low | High | Monitoring of delivering to KPIs Commissioner relationships Preparation to ensure tender ready | Chief Officer and Chair | Chief Officer reports to Board | | |
| 5c) Decrease in feedback due to competition from other bodies | Medium | High | Maintaining awareness of HWS Working in partnership with key organisations Being sensitive to operating in a competitive environment | Chief Officer and Chair | Reporting to Board | Keep raising awareness with other organisations of role of LHW | |
| 6 Externally driven priorities that may not match those of HWS and result in work not fitting into work programme | Medium | Medium | Working closely with partner organisations Awareness of potentially changing priorities Risk assessment of undertaking or not undertaking programme of work | Chief Officer | Chief Officer reports to the Board | | |





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| 7 Recommendations made by HWS are resisted by the receiving organisations leading to loss of effectiveness and credibility | Low | Medium | All recommendations should be evidence based and follow approved methodology Good relationship management | Chief Officer | Chief Officer reports to Board | | |

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| 1 The small size of the organisation leaves it vulnerable to staff changes, including as a result of sickness, affecting the ability to deliver HWS | High | High | Succession planning 3 month notices periods for Chief Officer and appropriate notice periods for other staff Good supervision of staff and their work Documented work programmes Good documentation Established recruitment policy Introduced a formal evaluation process for determining staff salaries | Chief Officer | Exception reporting to Chair Staff turnaround report as part of Business plan monitoring | Potential to investigate use of Occupational Health Support in addition to that in recruitment | |





| | | | Annual review of staff salary levels Annual review of staff performance (CO to be reviewed by Chair) Exit interviews and sickness return from absence interviews Ability to use reserves to recruit temporary staff, if necessary | | | | |
|---|--------|--------|--|--|-------------------------------|---|--|
| 2 Difficulties in recruiting/retaining volunteers including Board Members | Medium | Medium | Volunteer policyOn-going volunteer support | Chief Officer & Volunteer Officer | | Continue to explore opportunities for greater involvement of volunteers | |
| 3 Increasing demand for the IHCAS service not requiring an advocate but impacting on HWS staff time | Medium | Medium | Data collection Staff review Performance review of IHCAS Commissioning meetings | Chief Officer Advocacy Co- ordinator | Monitoring on a monthly basis | | |
| 4 Sustaining current workforce within commissioned budget | High | High | Positive working culture Supervisions Review Commissioning meetings Review Terms & Conditions | Chief Officer/ Board | | Continue to review budget at operational structure to meet HWS statutory requirements | |





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| 1 Reduction of income levels impact adversely on statutory activities | High | High | Annual budget planning cycle with supporting Business Plan and Budgets Reserves policy Explore income generation options | Chief Officer | Business Committee | | |
| 2 Sensitive cash flow situation resulting in pressures to meet financial commitments and adversely impacting on operational activities | Low | Medium | Monthly review of cash balances Adequate information flow to and from operational managers Recording of committed purchase orders in accounts systems Monthly reporting of adhoc payments | Chief Officer and RCC Head of Finance | Business Committee | | |
| 3 Deterioration in business relationship with project funders | Low | High | Written Agreements Project reporting Meeting funders terms, conditions and requirements | Chief Officer | Report to Board Reports to Funders | | |