## Strategic Risk No: 1

### Strategic Objective:

1, 2, 3

### Owner:

Chief Executive

### Description:

#### What is the risk:

The Care Inspectorate does not clearly articulate its purpose and deliver its objectives in alignment with the Scottish Government’s national priorities.

#### What are the possible consequences if the risk was to emerge:

- Lack of public and political confidence in the independent regulator
- Inability to provide the desired level of public protection, scrutiny and improvement

### Numerical Scoring of Raw Risk (ie Without Controls in Place)

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<thead>
<tr>
<th>What is the predicted likelihood of the risk occurring?</th>
<th>(A)</th>
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<td>What is the predicted impact of the risk?</td>
<td>(B)</td>
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<tr>
<td>(A x B) Numerical score of the total risk</td>
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<td>25</td>
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The raw risk is therefore: **Very High**

### Control Measures/Assurances

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<th>Risk Velocity</th>
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<tr>
<td>HIGH</td>
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Control Measures/Assurances proposed by Executive Team:

- Corporate Plan in place
- Scrutiny and Improvement Plan in place
- Success measures in place to support good governance and performance management and monitoring
- Quality Assurance monitoring and management arrangements in place
- Increasing involvement of user / carers to inform policy and practice: new Involvement Strategy in place
- Regular sponsor/ SG/ Chief Social Work Adviser/ Ministerial meetings and engagement events
- New ways of collaborative working with scrutiny partners; delivery partners; providers and umbrella groups
- Quality of care forums with stakeholders
- Public reporting strategy in place
Additional Control Measures/Assurances requested by the Board
- Pattern of complaints indicating lack of understanding of CI purpose

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<tr>
<th>NUMERICAL SCORING OF RESIDUAL RISK (ie WITH CONTROLS IN PLACE)</th>
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<td><strong>What is the predicted likelihood of the risk occurring?</strong></td>
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The **RESIDUAL** risk is therefore: **Low**

**RISK INDICATORS**

What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action)

- Consultation / survey feedback with key stakeholders
- Regular Ministerial and SG sponsor meetings
- Performance reports
- Media reporting
- Contact manager and link inspector liaison

**FURTHER ACTION REQUIRED**

- Monitor risk indicators
- Stakeholder surveys
Strategic Risk No: 2

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE:</th>
<th>1, 2, 3, 4</th>
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<tr>
<td>OWNER:</td>
<td>Executive Director of Strategy and Improvement</td>
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</table>

**DESCRIPTION:**

What is the risk: The Care Inspectorate does not maintain its staff capacity (including numbers, expertise, motivation, performance and capability) to deliver its organisational objectives.

What are the possible consequences if the risk was to emerge: Inability to deliver the scrutiny and improvement plan, loss of credibility and confidence in our ability to provide desired level of public protection.

**NUMERICAL SCORING OF RAW RISK (ie WITHOUT CONTROLS IN PLACE)**

<table>
<thead>
<tr>
<th>What is the predicted LIKELIHOOD of the risk occurring?</th>
<th>(A)</th>
<th>What is the predicted IMPACT of the risk?</th>
<th>(B)</th>
<th>(A x B) What is the TOTAL risk score?</th>
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<td>4</td>
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<td>4</td>
<td>16</td>
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The **RAW** risk is therefore: High

**CONTROL MEASURES/ASSURANCES**

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<tr>
<th>RISK VELOCITY</th>
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<th>MEDIUM</th>
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What controls/ procedures are in place/ needed to reduce the likelihood and impact of the risk to a more acceptable level?

Control Measures/Assurances proposed by Executive Team

**In place or imminent**

- Development of career pathways to widen the pool of people who can enter the Care Inspectorate as an inspector, enhance the role administrative staff can play in evidence gathering, and support the retention of skilled staff seeking promotion.
- Development of new initiatives to improve the culture and make the Care Inspectorate a destination employer, including UGR work, embedding a coaching culture, and effective Partnership Forum in place, and a more consultative approach to change management.
- Monthly workforce planning meetings led by the Scrutiny and Assurance Directorate, with professional input from OD, to identify likely vacancies.
• A short review of the assessment centre process to improve the speed and impact of recruitment
• Improved interventions to improve health at work and reduce days lost to illness
• A revised success measures framework which ensures that the totality of the Care Inspectorate’s activity is measured effectively
• Ongoing discussion with Scottish Government regarding resource allocation, and management prioritisation of efficiency savings within central support functions rather than scrutiny and improvement functions
• Development of an SQA-accredited Professional Development Award in Care Scrutiny and Improvement

Proposed or under development
• Development on a strategic workforce plan to establish a 5 year vision for staffing (work to be started)
• Development of a stronger offer around workforce skills
• Development of a new disaggregated OD / HR offer to improve focus in each area
• A review of PDRS systems
• A review of pay and grading
• Developing a stronger approach and strategy for recruitment campaigns to attract candidates

Additional Control Measures/Assurances requested by the Board

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The RESIDUAL risk is therefore: **Medium**
RISK INDICATORS
What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action)

- Quarterly reports and success measures
- Vacancy and absence rates
- Budget monitoring
- Monitoring of performance review take up
- Feedback from staff exit and return to work interviews

FURTHER ACTION REQUIRED

- A benchmarking exercise is required around pay, skills, knowledge in the sector to compare our reward and recognition strategy.
Strategic Risk No: 3

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<td>OWNER:</td>
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</table>

**DESCRIPTION:**

**What is the risk:**
The Care Inspectorate’s partnership/collaborative working does not contribute effectively to the successful delivery of its strategic objectives (or those of partners)

**What are the possible consequences if the risk was to emerge:**
Inability to deliver the scrutiny and improvement plan, loss of credibility and confidence in our ability to provide desired level of public protection

**NUMERICAL SCORING OF RAW RISK (ie WITHOUT CONTROLS IN PLACE)**

| What is the predicted LIKELIHOOD of the risk occurring? | (A) | 4 | What is the predicted IMPACT of the risk? | (B) | 4 | (A x B) | What is the TOTAL risk score? | 16 |

The RAW risk is therefore: **High**

**CONTROL MEASURES/ASSURANCES**

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<th>RISK VELOCITY</th>
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**In place or imminent**
- The duty of co-operation is established in law
- Scrutiny and improvement plan is in place and clearly aligned to Scottish Government’s national objectives
- Importance of collaboration is emphasised as one of four themes in the Care Inspectorate’s transformation plan
- Reciprocal board membership for chairs of SSSC / HIS
- Membership of HIS’ iHub governance board
- Joint Executive Team / Board meetings with other organisations
- Active participation in the newly-developed National Support Group of organisations involved in supporting health and social care integration
- Active participation in the Sharing Intelligence for Health and Social Care Group
• Regular liaison meetings with Education Scotland and officer-level contact with Mental Welfare Commission
• Active participation in the Strategic Scrutiny Group, the creation of a National Scrutiny Plan, and the LAN process
• Existing programme of shared inspections with Education Scotland, and active leadership roles in joint inspections of services for children and for adults.
• Willingness and keenness to collaborate with a wide range of public sector bodies and providers to support improvement
• Wide engagement in Scottish Government and sector-led groups, committees and fora
• Quality Conversations and other liaison meetings with providers and umbrella bodies
• An external communications strategy to make clear our role, activities and findings to a wider range of people
• Co production of resource materials used to support improvement

**Proposed or under development**
• A new approach to inspection planning amongst policy colleagues in the Scottish Government
• A wide programme of thematic reports and publications

Additional Control Measures/Assurances requested by the Board

**PLEASE ADD TO LIST IF ANY ADDITIONAL CONTROLS IDENTIFIED**

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<tr>
<td>What is the predicted <strong>LIKELIHOOD</strong> of the risk occurring?</td>
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The **RESIDUAL** risk is therefore: **Medium**
RISK INDICATORS
What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action)
• Quarterly reports
• Chief Executive reports to the board
• New success measures which seek to gauge how our work is received by partners
• Delays in publishing joint inspection reports or other publications
• Lack of clarity about the Care Inspectorate’s role and strategic objectives
• Inability to implement the scrutiny and improvement plan

FURTHER ACTION REQUIRED
• Monitor risk indicators and success measures
### Agenda item 8.2  
**Paper 2**

**Strategic Risk No:** 4

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<th>STRATEGIC OBJECTIVE:</th>
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<tr>
<td>OWNER:</td>
<td>Executive Director of Corporate &amp; Customer Services</td>
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<tr>
<td>DESCRIPTION:</td>
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<tr>
<td><strong>What is the risk:</strong></td>
<td>The Care Inspectorate does not have adequate financial resources to support its Corporate Plan with a resulting impact on delivering objectives to agreed quality standards</td>
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<tr>
<td><strong>What are the possible consequences if the risk was to emerge:</strong></td>
<td>Inability to deliver the Scrutiny &amp; Improvement Plan, loss of credibility and confidence in our ability to provide the desired level of public protection</td>
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### Numerical Scoring of Raw Risk (ie Without Controls in Place)

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<th>What is the predicted likelihood of the risk occurring?</th>
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<th>(B) 4</th>
<th>(A x B) Total risk score?</th>
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The **RAW** risk is therefore: High

### Control Measures/Assurances

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What controls/procedures are in place/needed to reduce the likelihood and impact of the risk to a more acceptable level?

Control Measures/Assurances proposed by Executive Team:

- Medium term budget and financial strategy considered by Resources Committee
- Positive working relationships developed and maintained with Scottish Government
- Transformation programme
- Best value programme
- Benchmarking
- Financial modelling
- Workforce planning
- Member/Officer/Partnership Forum budget working group
- Budget strategy risk register
- Internal audit programme
Additional Control Measures/Assurances requested by the Board

PLEASE ADD TO LIST IF ANY ADDITIONAL CONTROLS IDENTIFIED

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<td>(B) 4</td>
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<tr>
<td>(A x B) What is the TOTAL risk score?</td>
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<td>12</td>
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The RESIDUAL risk is therefore: High

RISK INDICATORS

What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action):

- UK and Scottish Government budget announcements
- Scottish Government budget briefings/discussions
- Budget monitoring reports showing unbudgeted cost pressures
- Inability to achieve a range of performance targets
- Greater than anticipated demand led activity such as new registrations and complaints investigations

FURTHER ACTION REQUIRED

- Resources Committee to develop and review medium term financial strategy - to incorporate scenario planning Q3 2016-17
- Member/Officer/Partnership Forum working group to develop budget risk register Q3 2016-17
- Ongoing monitoring of risk controls with Committee oversight - quarterly
- Further development and implementation of workforce strategy – up to 2017-18
Strategic Risk No: 5

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<td>OWNER:</td>
<td>Executive Director Corporate &amp; Customer Services</td>
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**DESCRIPTION:**

**What is the risk:**
We are not able to influence/persuade Government that legislation and/or policy needs to change to enable us to support innovation across health & social care

**What are the possible consequences if the risk was to emerge:**
Services are unable to innovate effectively due to our inability to reflect proportionate and improvement-led scrutiny approaches resulting in loss of credibility for the Care Inspectorate

**NUMERICAL SCORING OF RAW RISK (ie WITHOUT CONTROLS IN PLACE)**

| What is the predicted LIKELIHOOD of the risk occurring? | (A) 4 | What is the predicted IMPACT of the risk? | (B) 4 | (A x B) | What is the TOTAL risk score? | 16 |

The **RAW** risk is therefore: **High**

**CONTROL MEASURES/ASSURANCES**

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Control Measures/Assurances proposed by Executive Team:

- Regular sponsor/SG/Ministerial meetings
- Cross Government policy liaison and sponsor branch relationships
- Tracking and influencing of key developments in scrutiny, inspection and regulation
- CI intelligence and advice is used by SG for policy and legislative planning – this includes intel and advice gained through involvement of service users and their carers
- Restrictive legislation is flagged to SG legal advisors
**NUMERICAL SCORING OF RESIDUAL RISK** (ie WITH CONTROLS IN PLACE)

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<td>4</td>
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The **RESIDUAL** risk is therefore: **High**

**RISK INDICATORS**

What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action)

- Intel / reports of services that are unable to provide innovative approaches due to restrictive legislation
- Legislation and regulations are not regularly reviewed and updated where necessary
- Intel / reports of services that are unable to respond to the needs, preferences and aspirations of people using services
- Working relationships with SG colleagues not effective or credible

**FURTHER ACTION REQUIRED**

- Awareness raising with SG
- Ongoing monitoring of risk
- Accelerated discussion with SG legal advisers about registration categories in an integrated setting
Strategic Risk No: 6

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<th>STRATEGIC OBJECTIVE:</th>
<th>1 &amp; 4</th>
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<tbody>
<tr>
<td>OWNER:</td>
<td>Executive Director of Scrutiny &amp; Assurance</td>
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</table>

**DESCRIPTION:**

What is the risk: A serious failure in our corporate governance and management control arrangements for scrutiny & assurance (including our governance of partnership working) leads to a failure to deliver our objectives.

What are the possible consequences if the risk was to emerge: Loss of credibility and confidence in our ability to provide desired level of public protection.

**NUMERICAL SCORING OF RAW RISK (ie WITHOUT CONTROLS IN PLACE)**

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<th>What is the predicted LIKELIHOOD of the risk occurring?</th>
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The RAW risk is therefore: **Very High**

**CONTROL MEASURES/ASSURANCES**

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<th>RISK VELOCITY</th>
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What controls/procedures are in place/ needed to reduce the likelihood and impact of the risk to a more acceptable level?

Control Measures/Assurances proposed by Executive Team:

- CI Quality Assurance Framework and appropriate monitoring and testing
- Intelligence and Risk Framework
- KPIs
- Quality Indicators/Monitoring Measures
- Business Continuity/Disaster Recovery Planning
- Internal and External Audit
- Recently appointed Service Managers with pivotal quality assurance role.
- Directorate Plan developed with particular quality assurance and partnership working focus as a Directorate Objectives
- Greater emphasis on collaborative working (Leadership Theme)
- MOUs and information sharing protocols
• Partners involved in new scrutiny methodology development – practitioner advisory groups, joint staff development days
• Chair sits on partner scrutiny bodies board – HIS and SSSC
• Joint Exec Team meetings – HIS and SSSC
• Strategic Group meetings – Education Scotland, HMICS
• Joint consultation and stakeholder events
• Joint Board events
• Chief Exec sits on Strategic Scrutiny Group
• National Scrutiny Plan agreed between all partners
• Aligned corporate and financial objectives
• Cross Government policy liaison and sponsor branch relationships
• Collaborative approach to the Review of National Care Standards
• Consultation with service providers on changes to CI scrutiny or business activities
• Contact manager and Link inspector liaison support
• Quality conversation forums with providers
• Directorate Risk Register developed and regularly monitored and reviewed
• Directorate quality assurance strategy under development

Additional Control Measures/Assurances requested by the Board

### NUMERICAL SCORING OF RESIDUAL RISK (ie WITH CONTROLS IN PLACE)

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The **RESIDUAL** risk is therefore: **Medium**

### RISK INDICATORS

What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action)

- Complaints from registered care service providers and other scrutiny and delivery partners.
FURTHER ACTION REQUIRED

- Completion and implementation of a Directorate Quality Assurance Strategy now that the Service Managers have been appointed.

- Development of our approaches to risk and intelligence identified in the Intelligence Review undertaken by the then Head of Analysis and Business Planning in 2014

- Review of role of link inspectors and contact managers following outcome of Team Manager Review (Team Manager review commenced March 2016. Completed and report received for consideration by ET 2 Sept 2016)
Strategic Risk No: 7

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<th>STRATEGIC OBJECTIVE:</th>
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<tr>
<td>OWNER:</td>
<td>Executive Director of Corporate &amp; Customer Services</td>
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**DESCRIPTION:**

What is the risk:
There are gaps or inadequate coverage in the Care Inspectorate’s corporate governance arrangements

What are the possible consequences if the risk was to emerge:
Poor corporate governance is likely to lead to inefficiency, ineffectiveness, increased risk of fraud and a significant loss of stakeholder confidence

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The RAW risk is therefore: High

**CONTROL MEASURES/ASSURANCES**

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What controls/procedures are in place/ needed to reduce the likelihood and impact of the risk to a more acceptable level?
Control Measures/Assurances proposed by Executive Team

- Regular review of the Code of Corporate governance incorporating policies, disclosure arrangements, strategies, planning systems and performance management arrangements
- Annual review of Board and Committee effectiveness
- External governance review (CIPFA)
- On Board training and Member induction
- Performance management regime
- Performance appraisals (members and staff)
- Internal & External Audit assurance
- Risk Review and embedding of risk management
- Board & staff members with corporate governance qualifications
Additional Control Measures/Assurances requested by the Board

PLEASE ADD TO LIST IF ANY ADDITIONAL CONTROLS IDENTIFIED

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### NUMERICAL SCORING OF RESIDUAL RISK (ie WITH CONTROLS IN PLACE)

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<th>What is the predicted <strong>LIKELIHOOD</strong> of the risk occurring?</th>
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<th>3</th>
<th>(A x B) What is the <strong>TOTAL</strong> risk score?</th>
<th>6</th>
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The **RESIDUAL** risk is therefore: Medium

### RISK INDICATORS

What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action)

- Results from self assessments and external assurance measures

### FURTHER ACTION REQUIRED

- An action plan will be developed following the Board review of corporate governance
Strategic Risk No: 8

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<th>STRATEGIC OBJECTIVE:</th>
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<td>OWNER:</td>
<td>Executive Director of Strategy and Improvement</td>
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**DESCRIPTION:**

**What is the risk:**

We are not able to evidence our contribution to the improvement agenda on topics such as the integration of health & social care, strategic (intelligence based) commissioning, early years services and community justice

**What are the possible consequences if the risk was to emerge:**

Lack of public and political confidence, inability to provide desired level of public protection

**NUMERICAL SCORING OF RAW RISK (ie WITHOUT CONTROLS IN PLACE)**

| What is the predicted LIKELIHOOD of the risk occurring? | (A) 5 | What is the predicted IMPACT of the risk? | (B) 4 | (A x B) What is the TOTAL risk score? | 20 |

The **RAW** risk is therefore: **Very High**

**CONTROL MEASURES/ASSURANCES**

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What controls/procedures are in place/needed to reduce the likelihood and impact of the risk to a more acceptable level?

Control Measures/Assurances proposed by Executive Team

**In place**

- Inspection methodology for regulated care and strategic scrutiny develops in line with emerging policy so we are able to report, at the right time, on the impact of new legislation and initiatives, including integration, the Children and Young Peoples (Scotland) Act, the Carer’s Act, and the new National Care Standards, and also able to support improvement effectively through scrutiny.
- Scrutiny and improvement plans are strategically considered, developed in consultation with a wide range of people, and aligned to our strategic workforce plan, budgets, and operational delivery
- Regular thematic publications on key policy issues that are rooted in evidence and analyse our findings from a practice and service-delivery perspective
- A new external communications strategy provides a
stronger focus on raising awareness of our findings amongst a wider pool of people

- New success measures are in place to more broadly illustrate the totality of our work.
- Senior staff engage regularly with a wide range of civil servants and agencies to explain our work and collaborate where possible
- A reformed health improvement team is bringing a sharper focus to our improvement support work
- We are actively collaborating with a wide range of organisations, including Social Work Scotland and CSWOs.

**Proposed or under development**

- New joint scrutiny models with HIS will allow us to comment on, and support improvement in, strategic commissioning.
- The development of a new intelligence model
- The development of regular market oversight reports for local areas and the wider sharing of data and assessments of quality and risk
- The development of a new improvement strategy to set out our contribution to improvement support for services and commissioners

**NUMERICAL SCORING OF RESIDUAL RISK (ie WITH CONTROLS IN PLACE)**

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The **RESIDUAL** risk is therefore: **Medium**
RISK INDICATORS

What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action)

- Lack of awareness of our role in supporting improvement or our evidence base on quality and performance
- Unwillingness of partners to collaborate or engage in joint work
- Number of information requests we receive and the number of evidence-based reports and publications we produce
- New success measures
- Public confidence in the Care Inspectorate declines

FURTHER ACTION REQUIRED

- Further work is needed to invest in our ICT systems to support a future intelligence model
- Further work is needed to assess public confidence in our work
- We need to improve our collection and monitoring of improvement activity on and outwith inspection
Strategic Risk No: 9

<table>
<thead>
<tr>
<th>STRATEGIC OBJECTIVE:</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>OWNER:</td>
<td>Executive Director of Corporate &amp; Customer Services</td>
</tr>
</tbody>
</table>

**DESCRIPTION:**

What is the risk: The CI experiences disruption or loss or reputation damage from a failure in its data/information management business systems, physical security or information governance arrangements.

What are the possible consequences if the risk was to emerge: Financial, data or reputational loss impacting public and political confidence, available resources and/or ability to provide the desired level of protection.

**NUMERICAL SCORING OF RAW RISK (ie WITHOUT CONTROLS IN PLACE)**

<table>
<thead>
<tr>
<th>What is the predicted LIKELIHOOD of the risk occurring?</th>
<th>(A)</th>
<th>What is the predicted IMPACT of the risk?</th>
<th>(B)</th>
<th>(A x B) What is the TOTAL risk score?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>4</td>
<td></td>
<td></td>
<td>20</td>
</tr>
</tbody>
</table>

The RAW risk is therefore: Very High

**CONTROL MEASURES/ASSURANCES**

**RISK VELOCITY**

<table>
<thead>
<tr>
<th>X</th>
<th>HIGH</th>
<th>MEDIUM</th>
<th>LOW</th>
</tr>
</thead>
</table>

What controls/procedures are in place/ needed to reduce the likelihood and impact of the risk to a more acceptable level?

- ICT security including perimeter firewall, anti malware software, password security, mirrored infrastructure, server resilience, offsite backup storage, encrypted devices and data delivery etc - full list of controls is available on request
- Trained ICT staff, user training, security policies, change control planning
- Physical security measures – secure entry systems, secure server rooms, annual property risk assessments, asset register
- Information Governance – trained staff, records management policy and plan in place
Additional Control Measures/Assurances requested by the Board

PLEASE ADD TO LIST IF ANY ADDITIONAL CONTROLS IDENTIFIED

### NUMERICAL SCORING OF RESIDUAL RISK (ie WITH CONTROLS IN PLACE)

<table>
<thead>
<tr>
<th>What is the predicted LIKELIHOOD of the risk occurring?</th>
<th>(A)</th>
<th>What is the predicted IMPACT of the risk?</th>
<th>(B)</th>
<th>(A x B) What is the TOTAL risk score?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3</td>
<td></td>
<td>3</td>
<td>9</td>
</tr>
</tbody>
</table>

The **RESIDUAL** risk is therefore: **Medium**

### RISK INDICATORS

What risk indicators are/could be used to monitor risk (ie what are the triggers for taking action)

- ICT performance metrics
- Major system failure reports
- Security breaches
- Data breach reports
- Slippage on records management plan implementation

### FURTHER ACTION REQUIRED

- Continue regular network penetration testing
- Continue regular testing of backup arrangements
- Continue annual property risk assessments
- Implementation of the records management plan and subsequent reporting to Committee/Board