

Healthwatch Brighton and Hove Summary Risk Register - (opened December 2023)

Purpose of this policy

- Healthwatch Brighton and Hove aspires to highest standards of governance and understands the essential role played by understanding internal and external risks. This policy describes the approach taken by Healthwatch Brighton and Hove to identify and manage risk.
- A risk register is a document used as a risk management tool and to fulfil regulatory compliance acting as a repository for all risks identified. It will also include additional information about each risk, e.g. nature of the risk, reference and owner, mitigation measures. As risks are identified they are logged on the register and actions are taken to respond to the risk. The main purpose of the risk register is to serve as the database for all organisational risks. These risks will be categorised as Communications; Contractual; Political; Safeguarding; Staff / Volunteers; Stakeholders; Sustainability
- The risk register enables **Healthwatch Brighton and Hove** to identify and manage all possible or potential risks and to score and prioritise those risks. This involves scoring each risk on two major dimensions:
 - 1. The likelihood of that risk occurring
 - 2. The impact of that risk should it become a reality.
- Understanding these two dimensions helps us to prioritise which risks need to be addressed or monitored more closely. Corrective actions will be required if the likelihood of a risk turning into an incident is high and the severity is also high. These corrective actions and controls should serve to mitigate the chance of the risk occurring or reduce the severity in the case of it happening.
- The risk register is a live document which needs to be updated with new risks and existing risks reviewed and re-assessed. Newly identified risks will once again be assessed and dealt with accordingly.
- The risk register will be reviewed quarterly by the CEO and Head of Research, including the staff team and a selection of volunteers and presented to full Board meetings bi-annually.



Definitions

Risk No.	Unique identifier for the risk.
Date identified	Date the risk was originally identified or date when annual risk register
	developed.
Risk Category	Will usually be one or more of Communications; Contractual; Political;
	Safeguarding; Staff / Volunteers; Stakeholders; Sustainability.
Risk Title	Name the risk will be known as.
Risk	Description of the risk.
Consequence	What will happen if the risk occurs.
Risk level when identified	How likely is that the risk will occur on a scale of 1-6 and what would the
	impact be on a scale of 1-5. Risk level is Likelihood multiplied by impact.
Risk owner	The person who will be responsible for managing the risk.
Risk strategy	Mitigate and accept; acceptance of the risk; transfer the risk e.g. to
	insurance.
Mitigations	Actions that can be taken to reduce the likelihood of the risk occurring.
Risk level after mitigating actions	The level of risk in likelihood and impact remeasured on the 1-5 scale.

Archiving principles

Risks will be **closed** and archived in any of the following circumstances:

- When the risk is no longer present.
- When the mitigating actions mean that the risk impact/likelihood has changed significantly meaning that it no represents an unmanageable risk to the organisation.
- When the external operating environment undergoes significant meaning the risk no longer direct relates to Healthwatch.

Approval

Approved by Healthwatch Brighton and Hove Board of Directors

- Date:
- For review:
- Responsible Officer: Chief Executive Officer of Healthwatch Brighton and Hove



Risk register

Rating	Impact	Likelihood
1	Not critical to continued operation	Very unlikely
2	Minor in some areas	Unlikely
3	Minor in many areas	Moderately likely
4	Significant, not affecting operations	Likely
	short term but may long term	
5	Significant in medium term, relates to	Highly likely
	substantial operational areas	
6	Fundamental to continued operation	Near certain

<u>Risk assessment</u>

High 15+ Moderate 10 - 14 Low <9

Healt	Dec 23 Stakeholders Recorded failures of key services. UHSx police investigat results in criminal char CQC report further				December 2023: All risks reviewed quarterly.					
Risk No.	Date id'd		Risk title	Risk	Consequence	Risk level when id'd	Risk owner(s)	Mitigations	Risk level after mits	
1	Dec 23	Stakeholders		UHSx police investigation results in criminal charges. CQC report further downgrades the Trust.	Public confidence lost in a key service providers. Public concerns/enquiries increase. Healthwatch needs to redirect resources to deal with fallout.	5x5 = 25	CEO	 CEO having regular 1:1s with Trust CEO, NHS Sussex and CQC to horizon scan for likelihood of bad news allowing more time to consider resource impacts. CEO attends key strategic meetings with system partners and obtains details of system wide risk management approach and to escalate patient concerns. CEO escalates concerns to Healthwatch England to obtain advice and support. Healthwatch role limited when external organisations issue reports/findings. Trust CEO attends HWBH Board to be questioned about plans – holding to account. Work plan to include series of Enter & Views at Trust. Comms plan developed for press release and interviews. Ongoing partnership working with Trust. 	4x5 = 20	

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2	Dec 23	Sustainability	Loss of Healthwatch contract	The contract to deliver HWBH is not won by HWBH CIC.	Delivery of the B&H Healthwatch goes to a different provider	6x4 = 24	CEO Chair Board	 A Task and Finish Group will be established to provide advice and guidance to the CEO. Additional external consultancy resource will be commissioned to support planning and workplan. A plan of key activities will be identified e.g. competitor analysis, stakeholder and Analysis, a workshop to explore Quality Question examples/case studies. A review of all policies will be undertaken to ensure we have all key documents and action is taken to fill any gaps e.g. Comms & Engagement policy. The staff team and key volunteers will be involved in the process to maximise expertise and knowledge. The CEO will lead the team to focus on promoting our impact more widely, to maximise public support and raise awareness of our brand e.g. the Head of Research will develop a new impact tracker, the CEO will and Chair will promote awareness and achievements by meeting with all city Councillors, the CEO will meet with the Chair of the relevant Council sub-committee. The CEO will liaise with Healthwatch England to influence funding and contract length The CEO will linformally discuss with Leads of Healthwatch West and East Sussex to seek agreement not to bid for the contract An exit planning/strategy will be developed to cover for a scenario where we lose the contract and need to handover to the new provider. 	5x3 = 15
3	Dec 23	Sustainability	Reduced income	LA core funding is reduced	Inability to meet statutory Healthwatch functions	6x4 = 24	CEO	 Demonstration of our impact and effectiveness to Commissioner/Council and why existing staffing are required to deliver existing model, to warrant retention of full amount of funding from DHSC. Broadening of income streams. Effective oversight of income vs actuals. Maintain reserves at recommended level. New staff recruitment roles are limited to one-year contracts initially. 	5x3 = 15
4		Sustainability	Demand outstrips capacity	Healthwatch unable to cope with demand due to impact	Reduced ability to deliver statutory	5x4 = 20	CEO	 Review of our planning and prioritisation process to ensure equality of effort is delivered on core and additional work. 	5x3 = 15

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				of system pressures on health and care system.	Healthwatch functions. Risk of poor staff wellbeing.			 Ensure our work programme is informed by what people tell us and rooted in lived experience. Ensure workplan is equal to capacity and includes room to respond to unexpected. Apply a systematic approach to escalating concerns. Effective support and engagement provided for volunteers to ensure high retention levels and support staff team capacity e.g. acting as Meeting Reps in the place of staff members. Work as Healthwatch in Sussex to deliver joint projects, sharing the demand but achieving equal amount of recognition. 	
5	D 22	Sustainability	Insufficient cash reserves	Outgoings exceed income from core contract and generated additional income	Organisation end year with a net loss and no reserves to meet core functions and running costs	6x3 = 18	CEO	 Effective oversight of income vs actuals delivered quarterly. Success in securing different funding models for projects to lessen reliance on one source of additional income. Effective invoicing of additional income sources. Maintain reserves at recommended level. 	4x3 = 12
6	Dec 23	Staff/volunteers	Staffing	Loss of existing staff members / in ability to recruit suitable candidates	Inability to meet statutory Healthwatch functions	6x3 = 18	CEO	 Retain existing experienced staff by offering incentives e.g. Christmas holiday leave, a bonus pot, pension contributions, offering training and personal development opportunities, securing varied and challenging projects to work on. Hold regular team meetings and individual 1:1s to discuss needs. Hold annual appraisals to reflect on achievements Recruitment via channels most likely to attract suitable candidates e.g. recruiting from within existing volunteer pool, Universities (student undertaking relevant courses). Offering above Living Wage. 	4x2 = 8
7		Sustainability	Maintaining independence	Perceived to be too close to, or part of the system decision making structures to maintain independence	Failure to comply with our function and values	6x3 = 18	CEO	 CEO to secure agreement between all three HW teams and NHS Sussex to development of an MOU, setting out parameters of any commissioned work. CEO to escalate challenges to independence with partners as appropriate and to Commissioner and Healthwatch England as necessary. Review conducted of our planning and prioritisation process to ensure equality of effort is delivered on core and additional work. Ensure our work programme is informed by what people tell us and rooted in lived experience. Complete a regular stakeholder survey to gain 360 feedback on our core functions. Issue reports and press releases holding system to account. 	4x3 = 12

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8	Dec 23	Sustainability	COVID-19/another pandemic/outbreak	Potential impacts arising from pandemics on business continuity. Requirements to adapt business model. Temporary loss of staff and/or volunteer members	Impacts on all areas of work and actual and potentially reduced funding.	4x4 = 16	CEO	 Ability to horizon scan via Place based and Sussex level meetings / partnerships. Fluid business model to respond quickly to changes. Historic experience of responding successfully to Covid which can be relied upon to shift focus to support health and care system and patients Highly skilled and experienced staff team who are adaptable. Existing projects base developed during Covid to build on. Success in securing different funding models. Business Continuity Plan setting out focus of activities and arrangements to adapt to new way of working. Robust IT system. Workplan which is regularly reviewed. Previous success in recruiting significant number of new vols during Covid 19. Staff structure means that project responsibility can shift. 	4x3 = 12
9	Dec 23	Political	Political volatility	Change of national and local political commitment to Healthwatch	Future of organisation under threat	4x4 = 16		 Maintain positive local political relationships with Councillors and MPs, working with them and responding to enquiries. Attend party meetings to present on HWBH activities / achievements. Meet routinely with Chairs of HWB and HOSC. Secure Councillor's signup to monthly newsletter. Work with MPs to raise issues in Parliament. Liaise with Healthwatch England, providing evidence to enable them to effectively campaign at ta national level with Gov to maintain existing HW model but to campaign for additional income. 	4x3 = 12
10	Dec 23	Staff/volunteers	Staff Wellbeing	Poor staff wellbeing due to work, external factors e.g. cost of living crisis, COVID/pandemic, other	Decreasing motivation and increased stress and anxiety. Risk of increased sickness. Risk of reduced effectiveness in job role. Inability to meet statutory Healthwatch functions.	5x3 = 15		 Identify solutions meeted. Identify solutions to support staff with their health and wellbeing. Deliver a series of Away Days out of the office and focussed on team bonding. Continue to provide free counselling offer. Range of training activities delivered and planned. Regular 1:1s with line manger to identify any concerns and out in place agreed actions to support staff. Annual appraisals to provide an opportunity to discuss concerns/plans for the future. Monitoring of staff sickness levels to spot concerns. Revised HR policies in place to support staff and the protect organisation. 	4x2 = 8
11	Dec 23	Staff/volunteers	Volunteers	Unable to recruit and/or retain volunteers	Reduced support for activities/ reduced ability to deliver core functions / bring in	5x3 = 15		 Effective support provided for volunteers to ensure high retention levels. Review Volunteer Strategy and active volunteer listening/engagement. 	4x2 = 8

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12	Dec 23	Sustainability	Delayed receipt of income	Delayed payment of funds owed.	additional income as unable to deliver projects Operating at a financial deficit.	5x3 = 15	 Maintaining an up to date record of volunteers and interests. Offer varied and rewarding roles and activities. Continually recruit new volunteers Demonstrate the difference that volunteers make and the value to Healthwatch. Demonstrate how we value volunteers by hosting regular get togethers, producing a dedicated newsletter and saying thank you. Effective oversight of income vs actuals delivered quarterly. Effective invoicing of additional income sources. Working with trusted partners. 	4x2 = 8
13	Dec 23	Stakeholders	Partnerships	Lack of support from key partner organisations	Reduced impact and limited opportunities to reach communities	5x3 = 15	 Team focus on continuous relationship and alliance building. Develop positive relationships with key VCS organisations through co-production of projects. Ongoing engagement with partners through forums, boards and specific projects and areas of concern, such a young people's mental health. Maintaining role as a critical friend. Demonstrating and communicating benefits to all and willingness to share achievements with partners (acknowledging their role). Ensure that some of the workplan and programme of activities are linked to partner priorities. 	4x2 = 8
14	Dec 23	Impact	Conflict between raising issues and generating solutions.	Need to raise concerns as a statutory function. Challenge of developing solutions in a pressured system.	Failure to raise concerns, or risk of raising concerns without being mindful of solutions.	5x3 = 15	 Apply a systematic approach to raising concerns. Staff team deliver good partnership working, to enable collaborative discussions. Impact Tracker in place and staff trained. This helps with tracking escalations and identifying outcomes, reported to Board as required. 	4x3 = 12
15	Dec 23	Legal	GDPR compliant	The organisation's systems and processes do not meet the standards required by data protection legislation	Non-compliance risks fines, damage to reputation and loss of confidence by staff, commissioners and public	5x3 = 15	 Ensure compliance with GDPR legislation by identifying areas of weaknesses and planning action to address. Annual review of system and processes to ensure compliance. Reporting to GP Group. Agreements secured with external partners to protect sensitive information being shared 	3x2 = 6
16	Dec 23	Communications	Public messaging	Directors, staff and volunteers give conflicting messages about Healthwatch and its role.	Confusion amongst partners. Loss of reputation	4x3 = 12	 Develop a Communications and separate Engagement strategy. All staff and volunteers to attend Healthwatch England induction training. Standardised messaging provided by staff team for volunteers engaged in external public facing activities 	3x2 =6



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							 Follow the Healthwatch branding. Helpline volunteers trained to deliver the service and offered immediate support to deal with any unusual or complex cases. Escalation of cases to CEO where relevant. Advice routinely checked via CRM by Head of Research/CEO. HWBH to follow public lines developed by partners e.g. on strikes. 	
17	Dec 23	Contractual	Lack of clarity between core business and commissioned work	Focus on project attracting additional income unintentionally removes focus from delivering core and statutory functions	Non-compliance with contracts/service specification conditions	6x2 = 12	 Regular 1:1s between CO and Commissioner to identify any concerns Regular 1:1s between CEO and Healthwatch England Regional Manager Produce regular bi-annual performance reporting for Commissioner demonstrating our delivery of core duties Complete the Healthwatch Quality Framework as a self- assessment of our performance. Introduce an Impact Tracker to monitor and demonstrate our impact Produce an Annual Report of our activities. Review of our planning and prioritisation process to ensure equality of effort is delivered on core and additional work. Host an annual Impact Event to promote out activities. Complete a regular stakeholder survey to gain 360 feedback on our core functions. Regular engagement with volunteers to gain feedback on our core functions. 	2x2 = 4
18	Dec 23	Sustainability	Infrastructure failure	Infrastructure failure, including IT failure and loss of premises, causing business disruption	Inability to meet statutory Healthwatch functions	4x3 = 12	 A Business Continuity Plan exists which describes activities to bring core and statutory functions back online in the event of an emergency. The Plan will be reviewed annually and approved by the Board. The Plan is supported by the Community Base (registered offices) Continuity Plan 	3x3 = 9
19	Dec 23	Safeguarding	Social media misuse – protection of individuals	Cyber bullying, hate crimes or grooming of child or adult with care needs	Severe emotional or physical harm to users. Damage to the reputation of the organisation	4x3 = 12	 Safeguarding training in place. Social media policy which sets out safeguards, principles, processes and contact details. Moderation of social sites. Line management and peer support for staff 	2x3 = 6
20	Dec 23	Reputational	Social media misuse	Platform security breaches causing posting of messages by unauthorised bodies. Posting of messages that do not represent the organisation's values or	Damage to the reputation of the organisation	4x3 = 12	 Robust IT and cyber security controls in place via Cyber. Essential certification which is reviewed and updated annually. Manage platform security and implement protocols to manage use of platforms. Develop a Social media policy. 	2x3 = 6



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				position on issues. Inappropriate behaviour from platform users, such as 'zoom bombing'				Online meeting protocols in place.Staff training.	
21	Jan 24	Legal	Sustainability	HMRC rules regarding staff expenses	HWBH may be in breach of HMRC rules regarding paying staff expenses and not treating these as 'benefits in kind'		CEO / Finance Director/ Board Sub Cttee	CLOSED 7 March 24 (see below)	
22	March 24 (NEW)	Staff/volunteers	Staffing	Loss of existing staff members due to sickness	Inability to meet statutory Healthwatch functions due to loss of capacity	6x3 = 18	CEO	 Hold regular team meetings and individual 1:1s to discuss core duties which need to be fulfilled Divert staff to critical areas Advise partners of temporary loss of capacity to manger reputational risk Advise Board Assess whether volunteer skills can be used to backfill duties Work with HW in Sussex partners to identify any areas which might be temporarily covered 	4x2 = 8



Closed risks

Healt	thwatch Brigh	nton and Hov	ve Risk Regist	er		December 2023: All risks reviewed quarterly.				
Risk No.	Date closed	Date id'd	Risk category	Risk title	Risk	Consequence	Risk level when id'd	Risk owner(s)	Mitigations	Risk level afterwards
21	7 March 2024	January 2024	Sustainability	HMRC rules regarding staff expenses	HWBH may be in breach of HMRC rules regarding paying staff expenses and not treating these as 'benefits in kind'	HWBH may be audited by HMRC and found to be in breach of regulations and be subject to backdated tax demand	6x4=24	CEO/ Finance Director	• Finance Director identified potential risk in Jan 2024 and asked CEO to deliver a self-assessment against the HMRC guidance. A detailed paper was delivered to the Finance Sub-Cttee ins February. External tax advice was then obtained which highlighted a potential risk that HWBH would not be able to argue that the office workplace was not a permanent workplace. In light of this advice, the Finance Director agreed that we should change our policy position going forward. The staff renumeration policy will be updated meaning that some staff travel and subsistence payments will be treated as being a payment in kind from 1 Aoril 2024 and subject to tax HMRC may still look into this but this judged to be a low risk as we are confident that we can argue our position up to now, was correct i.e. a regular pattern had only recently formed over the past months	4x2=8