



OLDHAM SAFEGUARDING ADULTS BOARD

Strategic Risk Management Policy



Version: 1.0

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1. Context and Introduction

- 1.1 The Care Act (2014) provides the statutory framework for Oldham Safeguarding Adults Board (OSAB) to seek assurance that all adults with care and support needs are receiving effective and proportionate safeguarding interventions.
- 1.2 This policy supports OSAB to be informed, proportionate, and proactive in identifying and managing strategic risks and issues impacting service delivery.
- 1.3 The aim of this policy is to:
- Provide clarity around how the OSAB manages risks that impact on safeguarding delivery within Oldham.
 - Clarifies how strategic risk management is embedded into the OSAB governance structure.
 - Prevent or reduce the potential consequences of risks that could impact delivery of the OSAB statutory duties, strategic objectives and vision.
 - Support informed decision making at a Senior Leadership level across the system.
- 1.4 This policy defines risk as:
- An uncertain event or set of events that, should it occur, will influence the achievement of OSAB or partner agency duties and objectives; or
 - A relevant event that has already happened and has impacted on or is currently impacting upon the achievement of OSAB or partner agency duties and objectives and requires management action.
- 1.5 A risk is measured by a combination of the likelihood of the perceived threat or opportunity occurring, and the magnitude of its impact.

2. Risk Register

- 2.1 OSAB holds a Risk Register as the main method of strategic risk management. **The register details those risks which pose the greatest challenge to the achievement of OSAB or partner agency safeguarding duties and objectives. The register also details system-wide safeguarding risks that are present at a single-agency level, but have wider impact at a multi-agency level.**
- 2.2 The register supports OSAB in:
- identifying and recording the risks that threaten effective adult safeguarding
 - assessing the likelihood of risks occurring and the type and severity of impact
 - putting in place arrangements to manage the risks
 - monitoring progress of any mitigating actions or system impact.
- 2.3 The register also provides a framework for seeking assurance as to how risks have been acted upon and supports the completion of deep dives into specific areas of risk aligned with the [OSAB Quality Assurance Framework](#).
- 2.4 Each partner agency is responsible for anticipating or identifying risks and informing the OSAB Business Unit for inclusion on the risk register. To support reporting, a short proforma is attached at Appendix A.

- 2.5 This policy recognises that risks are ‘dynamic’ and information recorded against a risk can fluctuate. Routine review of the register is therefore important to ensure ongoing assurance, or updated mitigating actions, are able to be completed.
- 2.6 Risks can be archived or closed on the register if they:
- Are no longer relevant but may become relevant again at a later date
 - Have been mitigated to risk rating of 3 or below and have become stable (see section 3.2).

3. Strategic Risk Management Process

- 3.1 The register records risks considering the following information:
- Description: Headline risk explanation
 - What is the Safeguarding Risk?: A clear rationale about why the risk must be managed by OSAB or why assurances about the risk mitigation actions are required by OSAB.
 - Date Added: The date the OSAB Statutory Leadership Group (SLG) agreed to add the risk to the register.
 - Risk Mitigation Lead(s): The identified lead(s) from partner agencies responsible for providing updates about risk mitigation.
 - Existing Controls/Mitigation Actions: A record of actions completed to mitigate the risk.
 - Developing Controls/Mitigation Actions: A record of planned or evolving actions to mitigate the risk which have not yet been completed. Updates are to be provided about these actions when they are available.
 - Progress: A record of any significant progress made with developing mitigating actions.
 - Date of Latest Update: A record of when the lead(s) last provided a progress update.
 - Risk Rating: The risk rating agreed by SLG using the agreed matrix.
 - Date of Latest Deep Dive: A record of when the lead(s) last presented to SLG and members of SLG discussed the risk in depth.
 - Risk Closed Date: A record of when SLG agree a risk can be closed. Going forward, closed risks to be moved to the final ‘closed’ tab.
- 3.2 Risk ratings are calculated as follows: **Likelihood** that this risk will directly affect adult safeguarding X **Impact** to life = Risk Rating

		Impact				
		1 None	2 Low	3 Medium	4 Serious	5 Severe/Fatal
Likelihood	5 Almost certain	5 Medium	10 High	15 High	20 Very High	25 Very High
	4 Very Likely	4 Medium	8 Medium	12 High	16 Very High	20 Very High
	3 Likely	3 Low	6 Medium	9 Medium	12 High	15 High
	2 Possible	2 Very Low	4 Medium	6 Medium	8 Medium	10 High
	1 Unlikely	1 Very low	2 Very low	3 Low	4 Medium	5 Medium

Green: Low/Acceptable Risk that requires no further action.

Amber: Medium Risk/Significant Concern that requires further information or mitigating action to reduce the risk to a point which is considered low/acceptable (green).

Red: High/Unacceptable risk that requires further information or assurance of mitigating actions to reduce the risk to a point which is considered medium risk/significant concern (amber) or low/acceptable risk (green).

- 3.3 Overall responsibility for managing the register will sit with the OSAB SLG. The register is shared with OSAB Board every quarter. All members of the OSAB SLG will therefore hold collective strategic responsibility for the register and are accountable for ensuring proportionate resource allocation into the mitigation of the identified risks.
- 3.4 When available, the risk lead(s) will be required to provide updates to the OSAB Business Unit, at OSAB SLG meetings, and/or at OSAB Board meetings as required. Drift and delay will be escalated to the OSAB Independent Chair.
- 3.5 In the event that a risk has been active on the register for a period of twelve months or longer, or where the risk rating score is 10 or higher (red: High/Unacceptable), the identified lead(s) are provided with advance notice to complete a deep dive or audit exercise. Lead(s) are responsible for presenting the latest information and/or findings to SLG. SLG are responsible for providing professional challenge and discussing potential changes to the risk rating and are also responsible for determining whether presentation to OSAB Board by the lead(s) is then required.
- 3.6 Where a risk continues to escalate or the impact to the adult safeguarding partnership is imminent and significantly damaging, an Extraordinary OSAB Board meeting will be convened to discuss the risk, mitigating actions, and additional urgent actions to be completed.
- 3.7 Information sharing will take place in line with the OSAB Information Sharing Agreement. In addition, Section 45 of The Care Act (2014) provides provision for information sharing with OSAB.

Appendix A: OSAB Risk Submission Form

Agency Name
Name of responsible Senior Leader
Please identify the risk
What is the impact of this risk on multi-agency adult safeguarding?
What is the likelihood of the risk occurring?
What are the factors currently increasing the risk?
What are the current mitigating factors?
What actions need to be taken to decrease the risk?
How will these actions improve outcomes for adults at risk?

Please email a copy of this form to OldhamSafeguardingAdultsBoard@Oldham.gov.uk attaching any relevant supporting documents.