DATIX Service Risks within Perth and Kinross HSCP Health Services (as at 17th March 2023)

DATIX RISK SUMMARY (HEALTH)

Current service risks within health services (30):

Ref	Locality/ Service	Grading and Title of risk	Risk Score & Grading	Last updated / Manager	Mitigations
829	P&K wide	Challenges in relation to accommodation for clinical and non-clinical staff across P&K	Consequence: 5 Likelihood: 4 20 RED	17-03-23 Evelyn Devine	P&K HSCP Chief Officer and key staff are participating in the one public estate discussions in order to identify appropriate accommodation for different health and social care teams. Head of Health has briefed NHS Director of Facilities re all options which have currently been explored in NHS and PKC family Interim Chief Exec of PKC has been briefed by Chief Officer re: accommodation needs for the HSCP. Premises requirements identified and summarised in a briefing paper for CCATS, IDART, CAMH's, potential relocation of GP premises in Perth City and a multi-disciplinary team supporting young people and adults with a learning disability and/or Autism with complex needs. Shared with NHS Procurement and Estates Accomodation walkrounds have been completed across Health & Social care sites with a view to mapping sites to accommodate future teams. Members of EMT to set up accomodation short life working group inclusive of partnership forum in order to support short, medium and long term moves for staff. Consultation paper to be completed in relation to engaging with staff re: accomodation moves.
982	Mental Health P&K wide	Workforce	Consequence: 4 Likelihood: 5 20 RED	27-02-23 Chris Lamont	Learning from staff exit interviews Operational Associate Medical Director for Mental Health is currently reviewing and arranging updated recruitment tools Begun the exploration of a model relating to General practitioner specialists in a collaboration with the AMD for Mental health P&K service entered contingency , and P&K Mental Health contingency meeting established. As of 26th Nov 21, the service will exit contingency. Liaison with Mental Health AMD, Nurse Director and Medical Director Medical contingency team to be based at Murray Royal Hospital commencing 21 June. The team was stood Down from 29th Nov 21 Pharmacy resource secured to support community teams from Oct 2022 Advanced Nurse Practitioner resource being secured to support contingency team Drafting patient pathways between CMHT and medical contingency team NHST are deploying medical resource from Dundee Secured adequate locum psychiatrist cover for the next six months.

1226	Prison Healthcare	GP Cover for HMP Perth	Consequence: 4 Likelihood: 5 20 RED	21-02-23 Angela Cunningham	AMD in communication with a practice who may be interested in a hybrid approach Authority given by Medical Director to utilise non-framework locum agency Escalate risk to red given short timescales and implications Clear process to attempt to secure additional cover using locum agency, local locum groups and regular locum s Documented escalation process should shifts remain unfilled Back up explored via GP practice who cover HMP Castle Huntly and GP OOH service Locum GP in place to cover full time in November 2022	
701	Prison Healthcare	Mental Health Waiting Times within the Prison Healthcare Service	Consequence: 4 Likelihood: 5 20 RED	16-01-23 Airlie Dewar	Review of workforce model to increase capacity of PHC teams to meet demand Seek agency nursing staff to reduce time spent by team administering medicaction Esclate to cheif officer concern over recutiment delays by HR SBAR to extend agency cover authorised by cheif officer Introduced telephone consulations Explore skill mix within the team Readvertise band 6 RN 3 × CN posts to support the workforce compliment /requirement SCN holding clinical caseload in Perth Consider Learning disability RN for team to enahnce service and enhance overall compliment given recruitment chail SCN increasing clinical caseload RAG status applied to all triaged referrals and current caseload Further recruitment - only two band 6 nurses in post, 1 sick and working notice, the other working notice - recruitment	
1267	P&K wide	Capacity and Flow Older Peoples Services	Consequence: 4 Likelihood: 5 20 AMBER	17-03-23 Amanda Taylor	Daily multiagency meetings within PRI regarding capacity and flow and prioritising of discharges Weekly Silver Command in place to monitor progress and actions Roll out of PDD implementation and training across sites now in place Frailty at Front Door Model in place Interim Bed usage across P&K to facilitate flow TQUIP Improvment Work for Community Hospitals Improvement on Guardianship Processes across P&K Focus on length of stay in Community Hospitals and improvement plans under development Care at Home Reviews to free up capacity Development of DD dashboard for P&K Extension of Interim Process for further 12 months Review of integrated discharge team Development of discharge team Development of of scharge pathways using home first approach Further developments on integrated care model	

1170	Medicine for the Elderly	P&K HSCP Hand Therapy Service - Waiting Times	Consequence: 4 Likelihood: 4 16 AMBER	17-01-23 Terrianne Thomson	Capacity within the team has been increased by adding appointment types Waiting lists have been cleansed to ensure it is a true reflection of demand HCSW has recently started in the role. 1 WTE currently vacant; postholder has accepted but not yet started. Being actively managed within the team to increase their clinical time
1157	Public Dental service	Failure to meet statutory levels of ventilation within Dental Surgeries in Angus & Dundee	Consequence: 4 Likelihood: 4 16 AMBER	13-01-23 Gillian Elliott	Level 3 PPE & FFP3 masks in place Enhanced cleaning and Infection Prevention & Control procedures in place Limiting access to the appropriate people with complex care needs. The Public Dental Service has secured funding for NHST Estates to seek tenders Apply fallow time and open windows when possible Respiratory risk assessment undertaken before any Aerosol generating procedures.
1151	P&K wide	Mental Health - Capacity & Flow	Consequence: 4 Likelihood: 4 16 AMBER	17-03-23 Chris Lamont	Daily multiagency meetings within POA regarding capacity, and daily Tayside GAP huddle attended by HSCP MH services. CMHT GAP & POA are supporting people within the community to prevent admission and to support discharges from hospital Funding from action 15 has enabled an increase in level 1 supports for people with less complex needs- this results in earlier intervention OP CMHT workers attend discharge planning meetings for people in MH inpatients Dementia liaison team provides specialised input for people with increased care needs in care homes across P&K GAP CMHT are in the process of aligning SW assistant to support with discharge planning. Review being undertaken of EMI patients within care home beds across P&K. This is to increase capacity. Capacity and Flow discussed at Silver Command meeting. P&K Mental Health rep present.
1128	Psychiatry of Old Age	Reduced Staffing within the 3 POA in-patients' areas in P&K HSCP	Consequence: 4 Likelihood: 4 16 AMBER	17-03-23 Shelly Milligan	Regular requests for bank and agency staffing to maintain core staffing levels All vacancies are attempted to be recruited to in a timeous manner Regular updates provided to HSCP senior management team on risks and staffing levels SBAR provided to consider a variety of contingency actions if required. Nursing Directorate have been informed of current situation Utilisation of workforce across three inpatient sites regularly being managed Introduction of 3.8WTE Band 4 across the service to compliment MDT. This is currently funded through registrant gaps acknowledging national workforce issues and recruitment of registrants. Annual running of the workforce tools to establish workforce requirements to meet service need. Proactive management of attendance at work for all employees Increased wellbeing support with involvement where appropriate with the Wellbeing service and local Psychology service. Introduction of non-Nursing roles such as ward clerks and activity support workers to support the MDT. Annual recruitment of NGPs into POA service
664	Perth City	Care & treatment hub accommodation within Perth City	Consequence: 4 Likelihood: 4 16 AMBER	17-03-23 Andrew Parker	Exploring possible premises with PKC and NHS Tayside Attempting to identify how we can move other services Submitting SBARS to executive management team, highlighting risk. Urgent meeting called with NHST estates depart on 23/10 to discuss options. Philebotomy service has been placed into contingency measures from 21st October due to lack of accommodation and increase of Secondary care blood requirements without additional resource. CCATs services have been relocated and centralised to Beechgrove House as a temporary measure until suitable long term accomodation has been found

1055	Primary Care	Risk regarding long term GP Practice sustainability	Consequence: 4 Likelihood: 4 16 AMBER	17-01-23 Ruth Buchan	Active engagement with Westward Programme and Educational Release Programme to promote P&K Sustainability requirements are being reviewed by the Senior Leadership Team Escalation processes through Primary Care Forum and the Primary Care Board. 2nd Sustainability survey completed, with 23/23 practices responding. Data being collated and themed for an update report, Recruitment and Retention increasingly problematic and increasing age of workforce / iminent retirals HSCP have committed significant recurrent resource to develop a Primary Care Resilience Team.	
657	South	P&K HSCP Community Hospital Registered Nurse Staffing Levels	Consequence: 4 Likelihood: 4 16 AMBER	17-03-23 Tia Dixon	Current shifts escalated through normal bank procedures and regular discussion with nurse bank Risk Assessment completed by SCN/CN for each shift to assess risk against staffing levels and actioned as appropriate Care Assurance Tools have been implemented by CPTM and actioned as appropriate 12 hour shift test of change In St Margarets and evaluation underway Contingency / Escalation Plan being developed to consider future options of bed model across Community Hospitals Block contract for bank/agency for 3 months requested for Crieff Review CV-19 testing pathway to ensure rapid testing and staff able to return to work where appropriate. Sharing staff across the four sites to manage the risk regarding staffing. Implementing a SCN huddle twice a week to review workforce. Exploring local pools to work across P&K HSCP.	
886	Medicine for the Elderly	Staffing challenges within the OT service at PRI	Consequence: 4 Likelihood: 4 16 AMBER	17-01-23 Terrianne Thomson	Following on from WoC Audit data, 2x band 5 posts have been recruited to and awaiting start dates 1 member of Bank staff supporting service Service has prioritised banding 1 & 2 patients Existing staff have undertaken extra hours where possible. Continue to look to the AHP bank where possible. Ensuring adequate staff supervision, and allowing staff to meet with team leads and raise any concerns. Wellbeing resources and champions available, and the NHST Wellbeing learn approached for support. Staff advised to complete DATIX regarding missed opportunities for therapy with patients. Staff asked to discuss with CPTM re any additional hours worked due to clinical demand. Professional support from CPTM and AHP Professional lead to staff where required. Week of care audit undertaken in Dec 2020, which has provided real world evidence of the challenges regarding demand and capacity ratio. 2x B6 in post and 2x B5; still B7 vacancy and B5 vacancy (recruited to, start mid Dec). Substantive staff base has significantly improved Identifying and communicating at the PRI site huddle on a daily basis specific words that may not have adequate OT cover for P1 & P2 referrals.	
983	Mental Health P&K wide	Ligature Anchor Points	Consequence: 5 Likelihood: 3 15 AMBER	23-12-22 Shelly Milligan	Clinical safeguards in place including risk assessment for self harm Developed standardised self harm care plan Increased staff training and awareness Manchester ligature assessment completed for all wards, reviews carried out annually Programme of work planned for red and amber areas in Leven ward, MRH. Risk Assessment for Electric profiling bed in situ for all patients within Leven as per Protocol for GAP Awaiting further updates from NHST Estates regarding ligature reduction programme in Leven ward Functional Ward Leven (ie locking of laudry door when not in use). An action plan has been developed by SCN/CPTM within F Angus and Dundee. All reflective within Manchester tool (last completed on 03/03/21 Implementation of NHST Improving Observation Policy Considering any DATIX alerts received for any new ligature anchor point use across Tayside	
1254	Prison Healthcare	Non-Emergency Transfer of Patients to Hospital	Consequence: 3 Likelihood: 4	12-01-23 Angela Cunningham	Daily review of cancellations and liaison with SPS Escalation to contract manager (SPS) via Governor in Charge Monitor and escalation via the national Prison Care Network	

			12 AMBER		
981	Mental Health P&K wide	Pathways of Care	Consequence: 3 Likelihood: 4 12 AMBER	13-02-23 Chris Lamont	 Whole system change programme is in place identifying key clinical pathways for development across the six project areas (Good Mental Health or All; Primary & Community Mental Health; Specialist Adult Mental Health; Children & Young Peoples Mental Health; Learning Disabilities & Mental Health; and Older Peoples Mental Health). P&K HSCP are contributing to this process, and reps have been identified. To discuss and monitor and feedback our local current MH provision to NHST via the MH & Wellbeing strategy group. Engaged with stakeholders and those with lived experience to seek their views and opinions on service provision and how this can be improved through care pathways. As part of NHS wide workstreams, 9 key areas are about to be reinstated with appropriate leads identified.
1293	Mental Health P&K wide	Mental Health Nursing and AHP workforce risk	Consequence: 3 Likelihood: 4 12 AMBER	31-01-23 Lindsey Griffin	Exploring additional nursing resource for the CMHT's For POA, we are continuing to secure supplementary staffing via bank and agency Ongoing recruitment to vacant Nursing posts Learning from staff exit interviews Advanced Nurse Practitioner resource being secured to support contingency team Workload tools have been undertaken within the POA wards
1038	Podiatry	Excessive patient waiting times within Tayside Podiatry service	Consequence: 4 Likelihood: 3 12 AMBER	08-02-23 Mark Finnon	Proactively engaging with Higher Education Institutions to attract Newly Qualified Practitioners Remobilisation of service and more robustly applying the NHST eligibility criteria for new and existing patients Creation of assessment hubs to allow for assessment against eligibility criteria Practice development training regarding wound management for staff to ensure staff knowledge and confidence around this Operational leads vetting weekly meeting to ensure consistency and equity across Tayside
565	Prison Healthcare	Prison Healthcare Staffing levels (nursing)	Consequence: 3 Likelihood: 4 12 AMBER	13-12-22 Angela Cunningham	Reduced health centre opening times at Castle Huntly Supplementary staffing utilises to maintain safe staffing levels (nursing & medical) SBAR requesting 12 week agency contract Recruitment to vacancies Robust promoting attendance at work processes Omissions of care monitoring Monitoring of waiting times SBAR approved by Cheif Officer for further agency bookings until Decmeber 2019. This has subsequently been extended, and a further SBAR request to be submitted by 16/10/20. 6 Registered Nurse have commenced in post in past month 4 Pharmacy Assistants have commenced in post in past month Drafting ANP role profiles to be agreed by Nursing Directorate Reduced staffing within the Bella Centre Continued recruitment. Invite potential candidates to visit prison Planning an open day for interested Bank staff Short term contracts offered to agency staff

613	Perth City	Excessive wait times for Adult Mental Health OT intervention	Consequence: 3 Likelihood: 4 12 AMBER	13-02-23 Lindsey Griffin	Waiting list is being managed Comunication to patients every 3 months regarding duty worker arrangements and to provide updates regarding their referral. Patients given contact details for OOH services. Manager submitted SBAR to senior management regarding the delay in recruitment. Manager proactively persuing a solution to the delay in recruitment. Providing ongoing support to existing staff working within the environment of excessive waiting times Communication to referers with regards to the waiting times situation Removal of OT staff from generic CMHT roles (which they are funded for) to allow clinical time to focus solely on OT intervention	
980	Mental Health P&K wide	Environment and Infrastructure	Consequence: 4 Likelihood: 3 12 AMBER	13-02-23 Chris Lamont	Near Me Technology web based video consulting service implemented NHS Tayside guidance and process in place to support home working arrangements. Safer Working Physical distancing risk assessments carried out across Health & Social Care services in P&K Business Continuity Plans in place across the HSCP, and reviewed as required Health & Safety workbook holders, Fire Duty Holders in place across the estate, and infection prevention & control processes and audit ongoing COVID restrictions no longer in place Currently exploring the use of one-off capital funding to improve our clinical environments. Capital funding has been identified for improving environment and improving fabric of Community MH bases. Current needs analysis being undertaken by CPTM. Multi-Professional Working Group has been established on the MRH site to identify potential accommodation to rehouse Mental Health staff. this will meet on a monthly basis.	
272	Medicine for the Elderly	Tay & Stroke wards - workforce	Consequence: 5 Likelihood: 2 10 AMBER	17-03-23 Anne Davidson	A x daily safety huddles in PRI - staffing ratios and clinical aculty discussed. Skill mix managed on per shift basis by SCN SCN's now working predominantly in a clinical role Staff undertaking additional hours and/or overtime Daily / weekly escalation process in place to highlight "hot spot" staffing defecits and sickness - appropriate use of bank and non contract agency when required A rolling advert is in place to advertise vacancies that exist in both wards. Timeous escalation for Agency and Bank for both areas. Promoting attendance at work being managed as per policy by SCN and Senior Nurse. Stroke Unit now have newly aligned budget and the weitbeing enablement practitioners have been appointed.	
569	Prison Healthcare	Medication administration within HMP Perth	Consequence: 2 Likelihood: 5 10 AMBER	17-03-23 Airlie Dewar	Use of supplementary staffing Recruitment to vacant posts SBAR authorising extension of agency staff agreed by Cheif Officer SLWG commenced jointly with SPS to review medicines administration across the prison SLWG commenced to review and share learning from CD incidents Core Agency staff in use who have received induction Mandatory CD traning sessions being delivered to Multidisciplinary staff in service Nursing monthly commenced CD audits Medicines incidents reviewed at Meicines managment meeting New medicines model implmented Pharmacy issuing all in possession medications Revised critical staffing levels and moved to core day Continue to work with SPS to identify novel ways of administering meds	
1242	Prison Healthcare	Delays in Pharmacy Order Deliveries	8 YELLOW	12-01-23 Angela Cunningham	Pharmacy Team is liaising with Lloyds on a daily basis Pharmacy staff in PHC are prepared to work flexibly to facilitate the processing of medicines when delivery times are cha Specialist Clinical Pharmacist escalates issues to Prisons Pharmacy Lead in HIS / JHC manager Lloyds have a recovery plan which is reviewed regularly Letter sent to all patients to advise of issues and to request their patience	

978	Mental Health P&K wide	Mental Health Strategy	Consequence: 4 Likelihood: 2 8 YELLOW	17-03-23 Chris Lamont	The P&K Mental Health and Wellbeing Strategy provides whole system mental health vision and programme of work over the next 3 years The P&K Mental Health and Wellbeing programme has 5 key themes, and 5 key priorities have been identified for implementation throughout the lifetime of the strategy. This will focus on priorities for mental health and wellbeing improvement and redesign Within P&K, there has been an Identified strategic lead for mental health and wellbeing as well as programme manager and business officer support. P&K have implemented mental health and wellbeing Clinical Governance Forum which meets on a monthly basis. This will monitor progress with the strategy as well as other areas of work. Heavily involved in workstreams led by Tayside in order to ensure that care provision is equitable Draft MH and Wellbeing strategy to be presented at IJB for approval on 1st Dec 2021
984	Mental Health P&K wide	Doctors in Training	Consequence: 4 Likelihood: 2 8 YELLOW	17-03-23 Chris Lamont	POA Consultant workforce supporting the training programme within P&K NHST AMD for Mental Health working with East of Scotland Deanery supporting and reviewing future trainee programme for NHS Tayside NHST AMD for Older People MH services currently exploring how we can ahance doctors in training provision within Inpatient services. This is in conjunction with our clinical lead in P&K
979	Mental Health P&K wide	Mental Health - Prescribing	Consequence: 4 Likelihood: 2 8 YELLOW	17-03-23 Chris Lamont	Continue to try to recruit Consultant Psychiatrists. Devising an ANP model Working with the Pharmacy team to recruit specific pharmacists to work with the CMHT's Actively pursuing local prescribing plans in conjunction with GP's GP within Primary Care / Mental Health link who can support developing prescribing plans Hub and Spoke model being planned across Adfult Community Mental Health services. Trainee ANP's for Mental Health have been recruited too. This will help alleviate Prescribing issues. Clinical Pharmacists involved in future planning of prescribing services for Mental Health
1174	North	Community Nursing staffing challenges within the North Locality	Consequence: 2 Likelihood: 3 6 YELLOW	03-02-23 Angela Milne	Review of skill mix Seeking support from the bank for registrants and HCSW, CCAT's, and part time staff and other localities 1 registered post out for advert, and 1 post is progressing to recruitment SBAR submitted to lead nurse about the overall risk and describing the complexity of caseloads Progressing recruitment for generic b4 support workers for LINCS (4 posts in total across North) Sought support from P&K HSCP lead nurse Boundary alignment with the south locality being progressed and patients are being gradually moved to the South caseload.
1087	iDART	iDART recruitment and retention and increasing caseload challenges	Consequence: 3 Likelihood: 2 6 YELLOW	17-03-23 Chris Lamont	Review of working arrangements with further health and social care integration and supportive measures to stabilise the situation. Creating operational action plan identifying measures that can be put in place to prioritise caseloads and make best use of available resource Recruitment to vacant posts; these have been advertised but not yet in post. Use of bank staff to support with specific clinics Admin support to help with reception duties. Additional short term accomodation lease in Perth Cty being sought
985	Mental Health P&K wide	Stakeholder and Partnership Engagement	Consequence: 4 Likelihood: 1 4 YELLOW	17-03-23 Chris Lamont	Recent "Listen" report published through independent services and as a consequence of this, there have been engagement sessions with staff to discuss its findings and improve engagement. Full scoping exercise has been undertaken through MH Improvement Academy around Consultation and Engagement systems within MH. P&K have a clear pathway defined through this exercise of how we will engage and consult on any relevant areas within MH. Undertook an extensive consultation and engagement excercise across communities across P&K to help receive feedback and information to help develop our local strategy All workstreams associated with delivering the strategy have lived experience and staff side representation. The P&K Mental Health and Wellbeing Strategy Group Is in place with broad representation from a range of stakeholders Locality newsiters have been developed and are disseminated out to all stakeholders and community members. Strategic Planning Partnerships in place across each of the HSCPs with strong links with third sector, service user and carer organisations. P&K have in place a Local Partnership form Within P&K, we have arrangements in place for service user engagement.

Risk Matrix:

	Consequence							
Likelihood of recurrence	Negligible (Category 3)	Minor (Category 2)	Moderate (Category 2)	Major (Category 1)	Extreme (Category 1)			
Almost certain - could occur frequently	•	•	•	•	•			
Likely - could occur several times	•	•	•	•	•			
Possible - may occur occasionally	•	•	•	•	•			
Unlikely - not expected to happen but might	•	•	•	•	•			
Rare - cannot believe this event would happen	•	•	•	•	•			