

Perth & Kinross Health and Social Care Partnership Strategic Risk Register

Version 2.23



Risk Ref.	Risk	EMT Risk Owner	Priority	Status
SR01	FINANCIAL RESOURCES: There are insufficient financial resources to deliver the objectives of the Strategic Plan.	Chief Financial Officer	1	←→
<u>SR02</u>	<u>WORKFORCE:</u> As a result of our ageing workforce, difficulties in recruiting suitably skilled and experienced staff in some areas, and the impact of COVID-19, there is a risk that the Partnership will be unable to maintain its workforce appropriately leading to unsustainable services.	Head of Health	1	()
<u>SR03</u>	SAFE WORKING: There is a risk that COVID-19 restrictions on safe working practice and social distancing leads to a reduction in service provision inhibiting the ability of the Partnership to achieve its strategic aims.	Head of Health	3	←→
<u>SR04</u>	SUSTAINABLE CAPACITY AND FLOW: As a result of the demographics of the people who use our services in Perth and Kinross and the impact of COVID-19 on our population there is a risk of 'capacity and flow' within our services being unsustainable.	Head of Adult Social Work	2	←→
<u>SR05</u>	SUSTAINABLE DIGITAL SOLUTIONS: As a result of being insufficiently digitally enabled or integrated there is a risk that the Partnership will not to be able to adapt effectively and efficiently to deliver new models of working.	Head of Adult Social Work	2	←→
<u>SR06</u>	VIABILITY OF EXTERNAL PROVIDERS: As a result of social care market conditions, availability of services, and COVID-19, there is a risk that external providers of care will not be able to meet people's assessed needs in the most appropriate way.	Head of Adult Social Work	2	< >
<u>SR07</u>	INSUFFICENT PREPAREDNESS FOR FUTURE COVID-19 (OR OTHER PANDEMIC) PRESSURES: Due to the scale of future COVID-19 outbreaks being unknown, there is a risk that preparations to sustain service provision will be insufficient.	Chief Officer	2	←→
SR08	WIDENING HEALTH INEQUALITIES: As a consequence of COVID-19 there is a risk that health inequalities widen significantly.	Chief Officer	2	()
SR09	<u>LEADERSHIP TEAM CAPACITY</u> : As a result of insufficient capacity in the Leadership Team there is a risk that the clear direction and leadership required to achieve the vision for integration is not achieved.	Chief Officer	1	< >
<u>SR10</u>	<u>CORPORATE SUPPORT</u> : As a result of insufficient Corporate staff resource there is a risk that functions (such as improvement and project support, robust administration as well as core corporate duties such as performance, risk management, strategic planning, governance and audit) will be Service unable to deliver as required to achieve strategic objectives.	Chief Financial Officer	1	←→
<u>SR11</u>	PRIMARY CARE: As a result of insufficient suitable and sustainable premises, and a lack of available national and cross-system flow of financial support, there is a risk that we will not be able to provide, within the legislative timeframe, the necessary services as defined within the 2018 General Medical Services Contract.	Clinical / Associate Medical Director	1	()
<u>SR12</u>	<u>EU WITHDRAWAL</u> : There is a risk that the UK will leave the EU without the necessary provisions in place to safeguard supplies, protect staff and reduce the effects of vulnerable UK citizens returning to the area, impacting on the ability of the IJB to ensure the sustainable delivery of Health and Care Services.	Head of Health	3	←→
<u>SR13</u>	INPATIENT MENTAL HEALTH SERVICES: There is a risk that due to the complexity of the governance arrangements for Inpatient Mental Health Services Perth and Kinross IJB will not be able to meet its Strategic Planning responsibilities.	Chief Officer	3	←→



SR01: FINANCIAL RESOURCES

Risk Owner: Chief Financial Officer

Corporate Business Partner: Finance Manager

Date Added to Register: 22 Oct 2020
Review Date: tbc as per priority

Frequency of Review: 4 weekly

Description of Risk: There are insufficient financial resources to deliver the objectives of the Strategic Plan

Risk Related to Achievement of Strategic Aim: Making best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 1

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \downarrow)$

←→ No Change

Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which may have a serious impact on the Partnership and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Impact (1-5)	Inherent Probability (1-5)	Residual Impact (1-5)	Residual Probability (1-5)	
5 5		5 4		
Inherent	Score: 25	Residual	Score: 20	

	Critical	5	10	15	20	25	
	Major	4	8	12	16	20	
Ħ	Moderate	3	6	9	12	15	
Impact	Minor	2	4	6	8	10	
ī	Insignificant	1	2	3	4	5	
		Very Low	Low	Medium	High	Very High	
	Probability						

Existing Controls:

- Financial Plan is approved annually by the IJB as part of a 3 Year Financial Plan
- Annual Budget Negotiation Process (PKC & NHST) is supported by robust budget review/due diligence process
- Effective member and officer working on development of the Budget through IJB BRG Process
- Financial Position is reported to each meeting of the IJB and is a standard item on the agenda.
- An IJB Reserves Strategy is in place.
- Regular informal meetings with NHS Tayside Director of Finance and PKC Head of Finance

Risk Overview:

The public sector economic landscape has been challenging for a number of years and the impact of demographic growth places an increasing pressure on demand for health and social care services in particular. Therefore the inherent Financial Resources risk is extreme. Controls are in place to reduce the risk exposure and they are working effectively, however they have a limited effect in reducing the overall residual score of the risk. Furthermore the financial implications of Covid are not yet fully known and may further raise the exposure level of this risk. As such the risk remains extreme and will be monitored and assessed at regular intervals.

Existing control rating: A - Controls are working effectively.



SR02: WORKFORCE

Risk Owner: Head of Health

Corporate Business Partner: Service Manager (Business Planning and Performance)

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority Frequency of Review: 4 weekly

Description of Risk: As a result of our ageing workforce, difficulties in recruiting suitably skilled and experienced staff in some areas, and the impact of COVID-19, there is a risk that the Partnership will be unable to maintain its workforce appropriately leading to unsustainable services

Risk Related to Achievement of Strategic Aim: 5. Making best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 1

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \downarrow)$

←→ No Change

Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which may have a serious impact on the Partnership and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Impact (1-5)	Inherent Probability (1-5)	Residual Impact (1-5)	Residual Probability (1-5)
5 5		5	4
Inherent Score: 25		Residual Score: 20	

	Critical	5	10	15	20	25		
Impact	Major	4	8	12	16	20		
	Moderate	3	6	9	12	15		
	Minor	2	4	6	8	10		
	Insignificant	1	2	3	4	5		
		Very Low	Low	Medium	High	Very High		
	Probability							

Existing Controls:

- Current workforce development strategy is being revised and updated to reflect future needs in line with Scottish Government deadline of 31 March 2022
- SLWG in place to Commence the refresh of the partnership Workforce Development Strategy and development plan
- Established, robust recruitment processes in place within statutory partner organisations

Risk Overview:

Due to the extreme pressures experienced through the Covid pandemic shortages in the availability of suitably qualified and experienced staff to sustain services is an extreme risk. Beyond the pandemic shortages in the available workforce is recognised nationally in respect to Health and Care Services. Although the current controls seek to reduce our exposure their effect is limited by the acute nature of this risk when considering, for example, current Covid pressures, rising demands for services and the age profile of our workforce. The therefore remains an extreme risk.

Existing control rating: C - Significant Controls not operating effectively



SR03: SAFE WORKING

Risk Owner: Head of Health

Corporate Business Partner: Governance and Risk Coordinator

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority

Frequency of Review: 12 weekly

Description of Risk: There is a risk that COVID-19 restrictions on safe working practice and social distancing leads to a reduction in service provision inhibiting the ability of the Partnership to achieve its strategic aims.

Risk Related to Achievement of Strategic Aim: Making best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 3

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \psi)$

←→ No Change

Risk Exposure Rating Priority 3: Risk is manageable after controls have been applied. Although usually accepted, these risks may require some additional mitigating to reduce probability if this can be done cost effectively. Reassess to ensure conditions remain the same and existing actions are operating effectively.

Inherent Impact (1-5)	Inherent Probability (1-5)	Residual Impact (1-5)	Residual Probability (1-5)	
5 5		3 3		
Inherent Score: 25		Residual	Score: 9	

	Critical	5	10	15	20	25	
	Major	4	8	12	16	20	
	Moderate	3	6	9	12	15	
Impact	Minor	2	4	6	8	10	
	Insignificant	1	2	3	4	5	
		Very Low	Low	Medium	High	Very High	
	Probability						

Existing Controls:

- Perth & Kinross HSCP Health and Safety Group providing oversight of partnership wide Safe Working, including compliance with Scottish Government guidance
- Statutory Partner Policies and Procedures on Health and Safety and Safer Working are in place having been reviewed in respect to COVID-19 pandemic.
- HSCP membership and attendance at Statutory Partner Health and Safety Committees/Groups which provide oversight of staffing/employer health and safety compliance
- P&K HSCP Partnership Forum Health and Safety and Safer working is a key consideration of the Forum.

Risk Overview:

Actions put in place near the beginning of the Covid-19 pandemic such as the completion of all physical distancing risk assessments for all health and social care settings, strict compliance with Scottish Government Safer Working guidelines and statutory partner policies and procedures have reduced the risk exposure to a manageable level. The Partnership continues to be engage with statutory partners to maintain control effectiveness and the risk will continue to be monitored and assessed.

Existing control rating: A – Controls are working effectively.



SR04: SUSTAINABLE CAPACITY AND FLOW

Risk Owner: Head of Health

Corporate Business Partner: Service Manager (Business Planning and Performance)

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority Frequency of Review: 8 weekly

Description of Risk: As a result of the demographics of the people who use our services in Perth and Kinross and the impact of COVID-19 on our population there is a risk of 'capacity and flow' within our services being unsustainable.

Risk Related to Achievement of Strategic Aim:

- 1. Working together with Communities
- 2.Prevention and Early Intervention
- 3. Person-centred health, care and support
- 4. Reducing Inequalities and unequal health outcomes and promoting healthy living

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 2

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \lor)$

←→ No Change

Risk Exposure Rating Priority 2: There are significant risks, which may have a serious impact on the Partnership or Service Delivery and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Impact (1-5)	Inherent Probability (1-5)	Residual Impact (1-5)	Residual Probability (1-5)	
5 5		5 3		
Inherent Score: 25		Residual	Score: 15	

	Critical	5	10	15	20	25	
	Major	4	8	12	16	20	
	Moderate	3	6	9	12	15	
act	Minor	2	4	6	8	10	
Imp	Insignificant	1	2	3	4	5	
		Very Low	Low	Medium	High	Very High	
	Probability						

Existing Controls:

- HSCP Capacity and Flow strategic portfolio provides local management, ownership
 and control of the whole system that supports capacity and flow through our services
- Perth and Kinross HSCP Transformation Board provides scrutiny, support and governance in respect to the approved transformation programme.
- NHS Tayside Unscheduled Care Board supports the wider development of strategic direction.
- HSCP Performance Framework details the key performance measures which relate to Capacity and Flow. These are reviewed routinely across the organisation
- Winter Planning Group oversees the Winter Plan and ensures that services are fit for purpose.

Risk Overview:

The inherent Capacity and Flow risk is significant. The Covid pandemic is continuing to have a significant impact operationally on Capacity and Flow within our services and whilst Controls are in place to mitigate the likelihood of the risk event occurring, they are not sufficiently effective to reduce the residual risk below the risk appetite. Improvement actions have been identified and are being taken forward within the Capacity and Flow strategic portfolio but the risk remains significant.



SR05: SUSTAINABLE DIGITAL SOLUTIONS

Head of Adult Social Work

Corporate Business Partner: Service Manager (Business Improvement)

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority Frequency of Review: 8 weekly

Description of Risk: As a result of being insufficiently digitally enabled or integrated there is a risk that the Partnership will not to be able to adapt effectively and efficiently to deliver new models of working.

Risk Related to Achievement of Strategic Aim:

- 1. Working together with Communities
- 2.Prevention and Early Intervention
- 3. Person-centred health, care and support

4. Reducing Inequalities and unequal health outcomes and promoting healthy living

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 2

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \lor)$

←→ No Change

Risk Exposure Rating Priority 2: These are significant risks, which may have a serious impact on the Partnership or Service Delivery and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Impact (1-5)	Inherent Residual Impact (1-5) (1-5)		Residual Probability (1-5)
5	4	4	3
Inherent Score: 20		Residual Score: 12	

	Critical	5	10	15	20	25
	Major	4	8	12	16	20
	Moderate	3	6	9	12	15
act	Minor	2	4	6	8	10
mp	Insignificant	1	2	3	4	5
		Very Low	Low	Medium	High	Very High

Existing Controls:

- PKHSCP Technology Enabled Care Digital Strategy Group develops and directs strategy.
- PKHSCP TEC/Digital Portfolio Strategic Action Plan is a scheduled agenda item on EMT, EOT, PKC Digital Board
- Members of the TEC Digital Strategy Group are members of the NHST/LA Tayside Digital Transformation Partnership (TDTP)
- PKC Information Governance has oversight and supplies guidance.
- PKHSCP TEC Digital Steering Group Scrutinises and escalates to Strategy group as required
- Signed Data Sharing Agreements are in place between NHST/PKC/PKHSCP/ISD and between PKC/NHS NSS/Scottish Government

Risk Overview:

The inherent risk of insufficient digital enablement is extreme; however the effectiveness of existing controls has reduced our risk exposure. The risk remains significant so further improvement actions are being developed to reduce the level of risk further. The risk will continue to be monitored and assessed due to the pace of change in this environment.

Probability



SR06: VIABILITY OF EXTERNAL PROVIDERS

Risk Owner: Head of Adult Social Work

Corporate Business Partner: Business and Resources Manager

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority

Frequency of Review: 8 weekly

Description of Risk: As a result of social care market conditions, availability of services, and COVID-19, there is a risk that external providers of care will not be able to meet people's assessed needs in the most appropriate way.

Risk Related to Achievement of Strategic Aim:

- 1. Working together with Communities
- 2. Prevention and Early Intervention
- 3. Person-centred health, care and support
- 4. Reducing Inequalities and unequal health outcomes and promoting healthy living

5. Making best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 2

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \downarrow)$

←→ No Change

Risk Exposure Rating Priority 1: There are significant risks, which may have a serious impact on the Partnership or Service Delivery and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Impact (1-5)	Inherent Probability (1-5)	Residual Impact (1-5)	Residual Probability (1-5)
5	5	5	3
Inherent	t Score: 25	Residual	Score: 15

	Critical	5	10	15	20	25	
	Major	4	8	12	16	20	
	Moderate	3	6	9	12	15	
act	Minor	2	4	6	8	10	
Impact	Insignificant	1	2	3	4	5	
		Very Low	Low	Medium	High	Very High	
	Probability						

Existing Controls:

- Local and national contractual arrangements provide a recognised framework for commissioned services
- Maintenance of strong and supportive relationships with providers create routine and regular opportunities to highlight issues of concern
- Care Home oversight group which provides routine and regular monitoring service provision
- Commissioned Services Board provides strategic oversight of commissioned services
- HSCP COVID-19 Governance arrangements which provide direction, scrutiny, oversight and support to ensure sustainability of providers

Risk Overview:

The inherent risk is extreme and the current pressures being experienced as a consequence of the Covid pandemic determine that, despite the effectiveness of current controls, the residual risk remains high.

Immediate measures are being taken to provide significant levels of support to our external providers and improvement actions have been identified to stabilise the situation and mitigate the risk further.



SR07: INSUFFICENT PREPAREDNESS FOR FUTURE COVID-19 (OR OTHER PANDEMIC) PRESSURES

Risk Owner: Chief Officer

Corporate Business Partner: Service Manager (Business Planning and Performance)

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority

Frequency of Review: 8 weekly

Description of Risk: Due to the scale of future COVID-19 outbreaks being unknown, there is a risk that preparations to sustain service provision will be insufficient.

Risk Related to Achievement of Strategic Aim:

- 4. Reducing inequalities and unequal health outcomes and promoting healthy living
- 5. Making best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \lor)$

←→ No Change

PRIORITY 2

Risk Exposure Rating Priority 2: There are significant risks, which may have a serious impact on the Partnership or Service Delivery and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Inherent Probability (1-5) (1-5)		Residual Impact (1-5)	Residual Probability (1-5)	
5 5		5 2		
Inherent Score: 25		Residual Score: 10		

	Critical	5	10	15	20	25	
	Major	4	8	12	16	20	
	Moderate	3	6	9	12	15	
act	Minor	2	4	6	8	10	
Imp	Insignificant	1	2	3	4	5	
		Very Low	Low	Medium	High	Very High	
	Probability						

Existing Controls:

- HSCP Workforce sickness absence modelling provides early warning of potential staffing shortages in light of Scottish Government pandemic modelling
- HSCP Workforce Matching Unit created as part of initial pandemic response to provide assurance to HSCP Executive Leadership of sustainability of services and to coordinate the movement between services where necessary
- COVID-19 Governance Command. Control and Communication Structure including strong links with Statutory partner command structures, ensures robust cross system sightedness of emerging issues and decision making.
- Local Resilience Partnership serves as a Regional Gold Command, HSCP Membership of this group ensures high level insight to emerging issues and decision making and links to wider statutory partners at a strategic level.

Risk Overview:

The measures taken to manage our response to the COVID-19 pandemic has provided insight into what is needed to sustain services despite the challenges faced. Given the controls which are now in place, the level of risk is reduced to a large extent but due to the unpredictability of the pandemic it still remains significant



SR08: WIDENING HEALTH INEQUALITIES

Risk Owner: Chief Officer

Corporate Business Partner: Business and Resources Manager

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority Frequency of Review: 8 Weekly

Description of Risk: As a consequence of COVID-19 there is a risk that health inequalities widen significantly.

Risk Related to Achievement of Strategic Aim: 4.

4. Reducing inequalities and unequal health outcomes and promoting healthy living

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 2

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \downarrow)$

←→ No Change

Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which may have a serious impact on the Partnership and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Inherent Probability (1-5) (1-5)		Residual Impact (1-5)	Residual Probability (1-5)	
4 5		3	4	
Inherent Score: 20		Residual Score: 12		

	Critical	5	10	15	20	25	
	Major	4	8	12	16	20	
	Moderate	3	6	9	12	15	
act	Minor	2	4	6	8	10	
mp	Insignificant	1	2	3	4	5	
_		Very Low	Low	Medium	High	Very High	
	Probability						

Existing Controls:

- Strategic Commissioning Plan 2019 documents the strategic ambitions of the IJB including those which relate to health inequalities.
- The HSCP COVID-19 Remobilisation Plan records the actions taken to mobilise services in response to the pandemic.
- The Equalities Strategic Forum provides a platform to ensure that local equality protected groups are represented effectively. This forum contains broad representation across the Community Planning Partnership including from statutory and third sector partners.
- Perth and Kinross Equalities, Empowerment and Fairness workstream (within the Recovery and Renewal agenda) focuses efforts across Council Services in respect to Equalities.

Risk Overview:

The COVID-19 pandemic has created unparalleled pressures on services and communities. The result of these pressures is not yet known or fully understood but the inherent risk of health inequalities widening is extreme. Existing controls which are in place to mitigate this risk are assisting us to better understanding where inequalities exist and consequently how best we can reduce them. The risk however remains significant.



SR09: LEADERSHIP TEAM CAPACITY

Risk Owner: Chief Officer

Corporate Business Partner: Chief Financial Officer

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority Frequency of Review: as per priority

Description of Risk: As a result of insufficient capacity in the Leadership Team there is a risk that the clear direction and leadership required to achieve the vision for integration is not achieved.

Risk Related to Achievement of Strategic Aim: 5. Making best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 1

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \downarrow)$

←→ No Change

Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which may have a serious impact on the Partnership and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Impact (1-5)	Impact Probability		Residual Probability (1-5)	
5 4		4	4	
Inherent	Score: 20	Residual Score: 16		

	Critical	5	10	15	20	25	
	Major	4	8	12	16	20	
	Moderate	3	6	9	12	15	
act	Minor	2	4	6	8	10	
Impact	Insignificant	1	2	3	4	5	
		Very Low	Low	Medium	High	Very High	
	Probability						

Existing Controls:

- HSCP Senior Leadership Team in place in the form of the Executive Management Team
- Chief Officer meets regularly with Chief Executive of both PKC and NHS Tayside including discussion on leadership resources
- Regular reporting on Partnership Improvement Plan to IJB Audit & Performance Committee including key actions to increase leadership capacity
- HSCP Covid Gold Command provide ongoing oversight of additional leadership required to support Covid Response and Remobilisation

Risk Overview:

Controls are in place which have slightly reduced the risk exposure but the residual risk remains extreme. The issue has been formally recognised and documented by External Audit and Inspection. Ongoing discussions with both partner bodies are taking place to address the risk although the pandemic and recruitment issues have impacted progress.



SR10: CORPORATE SUPPORT

Risk Owner: Chief Financial Officer

Corporate Business Partner: Business & Resources Manager

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority Frequency of Review: 4 weekly

Description of Risk: As a result of insufficient Corporate staff resource there is a risk that functions such as improvement and project support, robust administration as well as core corporate duties such as performance, risk management, strategic planning, governance and audit, will be unable to deliver as required to achieve strategic objectives.

Risk Related to Achievement of Strategic Aim: 5. Making best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 1

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \psi)$

←→ No Change

Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which may have a serious impact on the Partnership and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Inherent Inherent Impact Probability (1-5) (1-5)		Residual Impact (1-5)	Residual Probability (1-5)	
5	4	4	4	
Inherent	Score: 20	Residual Score: 16		

	Critical	5	10	15	20	25
	Major	4	8	12	16	20
	Moderate	3	6	9	12	15
Impact	Minor	2	4	6	8	10
	Insignificant	1	2	3	4	5
		Very Low	Low	Medium	High	Very High
	Probability					

Existing Controls:

- PKC and NHST have delegated a level of corporate support for local management by PKHSCP
- Corporate Support Agreement in place between PKIJB and NHST/PKC
- Chief Officer meets regularly with Chief Executive of both PKC and NHS Tayside including discussion on leadership and supporting resources
- Corporate Management Team oversee regular review and reporting to Executive Management Team on Corporate Support and prioritisation of existing resources
- Regular reporting on Partnership Improvement Plan to IJB Audit & Performance Committee
- PKHSCP Covid Gold Command provide ongoing oversight of additional leadership and supporting corporate support required to support Covid Response and Remobilisation
- The Annual Budget Setting Process captures all essential pressures/ investments including essential corporate support needs.
- The Covid Remobilisation Plan Process captures essential investment in increased corporate support capacity to ensure effective response and remobilisation.

Risk Overview:

External Audit and Inspection has been helpful in formally recognising material shortfall in levels of corporate support across a number of key areas. Whilst this is actively being addressed through ongoing discussions with partner bodies and the annual financial planning process, immediate increased capacity driven by Covid response is identified as part of the Local Remobilisation Plan.



SR11: PRIMARY CARE

Risk Owner: Clinical / Associate Medical Director

Corporate Business Partner: Service Manager (Business Planning and Performance)

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority Frequency of Review: 4 weekly

Description of Risk: As a result of insufficient suitable and sustainable premises, and a lack of available national and cross-system flow of financial support, there is a risk that we will not be able to provide, within the legislative timeframe, the necessary services as defined within the 2018 General Medical Services Contract.

Risk Related to Achievement of Strategic Aim:

- 1. Working together with our communities
- 2. Prevention and early intervention
- 3. Person-centred health, care and support
- 4. Reducing inequalities and unequal health outcomes and promoting healthy living

5. Making the best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 1

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \downarrow)$

←→ No Change

Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which may have a serious impact on the Partnership and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Critical

Inherent Impact (1-5)	Inherent Probability (1-5)	Residual Impact (1-5)	Residual Probability (1-5)	
4 4		4 4		
Inherent	Score: 16	Residual Score: 16		

	Cittical	3	10	10	20	23
	Major	4	8	12	16	20
	Moderate	3	6	9	12	15
act	Minor	2	4	6	8	10
mp	Insignificant	1	2	3	4	5
		Very Low	Low	Medium	High	Very High

Probability

Existing Controls:

- Perth and Kinross HSCP Primary Care Board fulfils the responsibility of a Programme Board overseeing the Implementation of the Primary Care Improvement Plan, including 2018 General Medical Services Contract
- Regular engagement with Local Medical Committee which jointly approves the development and implementation of new services in support of the 2018 General Medical Services contract
- The Pan-Tayside 2018 General Medical Services Contract Implementation Group assists in the management and delivery of Tayside/HSCP Programmes
- NHS Tayside Primary Care Board considers highlight reports from each HSCP including escalation of risks
- Integration Joint Board annual report on Primary Care Implementation Plan details progress and issues/risks affecting delivery
- Scottish Government 6 monthly report on Primary Care Implementation Plan details progress and issues/risks affecting
- Locality Management Team meet regularly to resolve/highlight operational delivery issues
- NHS Tayside governance structure for premises and asset management provides the mechanism for submission of Primary Care premises strategic Plan
- NHS Tayside over time improving sustainability of GP practice premises by replacing GPs as premises lease holders

Risk Overview:

The risk to primary care services relates to a number of issues with no single cause or solution. The complex and broad nature of this requires a manifold response internally within statutory partners, and externally at a national level. Control measures are in place but they are not fully effective and so improvement actions have been identified. The risk remains extreme.



SR12: EU WITHDRAWAL

Risk Owner: Heads of Service

Corporate Business Partner: Governance & Risk Coordinator

Date Added to Register: 22 Oct 2020

Review Date: tbc

Frequency of Review: 12 weekly

Description of Risk: There is a risk that the UK will leave the EU without the necessary provisions in place to safeguard supplies, protect staff and reduce the effects of vulnerable UK citizens returning to the area, impacting on the ability of the IJB to ensure the sustainable delivery of Health and Care Services.

Risk Related to Achievement of Strategic Aim: 5

5. Making best use of available facilities, people and other resources

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 3

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \lor)$

←→ No Change

Risk Exposure Rating Priority 3: Risk is manageable after controls have been applied. Although usually accepted, these risks may require some additional mitigating to reduce probability if this can be done cost effectively. Reassess to ensure conditions remain the same and existing actions are operating effectively.

Inherent Inherent Impact Probability (1-5) (1-5)		Residual Impact (1-5)	Residual Probability (1-5)	
4 4		4 2		
Inherent	Score: 16	Residual Score: 8		

	Critical	5	10	15	20	25			
	Major	4	8	12	16	20			
	Moderate	3	6	9	12	15			
Impact	Minor	2	4	6	8	10			
	Insignificant	1	2	3	4	5			
		Very Low	Low	Medium	High	Very High			
	Probability								

Existing Controls:

- NHS Tayside EU Exit Group collaborates with partners at a national level and provides direction and oversight in respect to preparedness.
- Perth and Kinross Council Brexit Group has HSCP representation and provides direction and oversight for all PKC services, facilities and citizens and covers everything from settled status to regulatory services, care homes and data storage.
- Tayside Local Resilience Partnership Working Group on EU Exit provides regional coordination and oversight of preparedness across wider statutory partner organisations
- HSCP Governance arrangements are in place to ensure local coordination within services and partners including GP Practices.

Risk Overview:

The uncertainty of future trading arrangements between the UK and EU meant the inherent risk to the sustainability of services is extreme. The controls which are in place combined, with the emergent trade agreement, have reduced the residual risk score to a manageable level.

Existing control rating: A - Controls are working effectively



SR13: INPATIENT MENTAL HEALTH SERVICES

Risk Owner: Chief Officer

Corporate Business Partner: Chief Financial Officer

Date Added to Register: 22 Oct 2020 Review Date: tbc as per priority Frequency of Review: 12 weekly

Description of Risk: There is a risk that due to the complexity of the governance arrangements for Inpatient Mental Health Services Perth and Kinross IJB will not be able to meet its Strategic Planning responsibilities.

Risk Related to Achievement of Strategic Aim:

- 1. Working together with our communities
- 2. Prevention and Early Intervention
- 3. Person-centred health, care and support

4. Reducing inequalities and unequal health outcomes and promoting healthy living

Current Risk Rating: (priority 1, 2, 3 or 4)

PRIORITY 3

Risk Movement: $(\uparrow, \leftarrow \rightarrow, \downarrow)$

←→ No Change

Risk Exposure Rating Priority 3: Risk is manageable after controls have been applied. Although usually accepted, these risks may require some additional mitigating to reduce probability if this can be done cost effectively. Reassess to ensure conditions remain the same and existing actions are operating effectively.

Inherent Inherent Inpact Probability (1-5) (1-5)		Residual Impact (1-5)	Residual Probability (1-5)		
4 4		3	3		
Inherent	Score: 16	Residual	Score: 9		

	Critical	5	10	15	20	25
	Major	4	8	12	16	20
	Moderate	3	6	9	12	15
Impact	Minor	2	4	6	8	10
	Insignificant	1	2	3	4	5
		Very Low	Low	Medium	High	Very High

Probability

Existing Controls:

- The IJB has in place an Integration Scheme agreed by both NHS Tayside and Perth & Kinross Council
- Tayside Mental Health Oversight Group includes membership from NHS Tayside, 3 Local Authorities and 3 IJB's
- PKHSCP Head of Health is a member of the Inpatient Mental Health Leadership Team
- Mental Health (including Inpatient Services) is a standard item on the IJB Agenda

Risk Overview:

The complex governance arrangements concerning Inpatient Mental Health Services meant that the inherent risk exposure was extreme. However the Review of the Integration Scheme for all 3 IJBs in Tayside will seek to clarify the governance arrangements and this, along with the other control measures currently in place, has allowed the risk exposure to be reduced to a manageable level. The control effectiveness and the progress of the review will continue to be monitored and assessed to ensure the risk remains manageable.

Existing control rating: A - Controls are working effectively



Risk Rating Matrix			Residual Score	Inherent Score										
Risk	Risk Title	Risk Owner	Risk Exposure – no controls	Feb 2021	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21
<u>SR01</u>	Financial Resources	Chief Financial Officer	25 (5x5) RED	20 (5x4) RED										
SR02	Workforce	Head of Health	25 (5x5) RED	20 (5x4) RED										
SR03	Safe Working	Head of Health	25 (5x5) RED	9 (3x3) YELLOW										
<u>SR04</u>	Sustainable Capacity And Flow	Head of Adult Social Work	20 (5x5) RED	15 (5X3) AMBER										
SR05	Sustainable Digital Solutions	Head of Adult Social Work	20 (5x4) RED	12 (4X3) AMBER										
SR06	Viability Of External Providers	Head of Adult Social Work	25 (5x5) RED	15 (5X3) AMBER										
<u>SR07</u>	Insufficient Preparedness For Future Covid-19 (Or Other Pandemic) Pressures	Chief Officer	25 (5x5) RED	10 (5x2) AMBER										
SR08	Widening Health Inequalities	Chief Officer	20 (4x5) RED	12 (3X4) AMBER										
SR09	Leadership Team Capacity	Chief Officer	20 (5x4) RED	16 (4X4) RED										
<u>SR10</u>	Corporate Support	Chief Financial Officer	20 (5x4) RED	16 (4X4) RED										
<u>SR11</u>	Primary Care	Clinical / Associate Medical Director	16 (4x4) RED	16 (4x4) RED										
<u>SR12</u>	EU Withdrawal	Head of Health	16 (4x4) RED	8 (4x2) YELLOW										
<u>SR13</u>	Inpatient Mental Health Services	Chief Officer	16 (4x4) RED	9 (3x3) YELLOW										



Background

Risk management is an indispensable element of good management. As such, its implementation is crucial to the Perth and Kinross Health and Social Care Partnership (PKHSCP) and essential to its ability to discharge its responsibilities. It is about improving PKHSCP's ability to deliver outcomes by managing our threats, enhancing our opportunities and creating an environment that adds value and is a key part of corporate governance.

Good risk management will help identify and deal with key risks facing the PKHSCP in the pursuit of its goals and not simply a compliance exercise.

As part of good corporate governance an organisation is required to demonstrate that risk management is an integral part of its activity. This requires risk management to be embedded within the culture of the Partnership.

Appetite

Perth & Kinross Health and Social Care Partnership's risk appetite in relation to its key areas of strategic risk is set out in table 1 below. Where risks fall in amber or red (priorities 1 & 2), consideration is given to the effectiveness of controls and any actions required.

Table 1.

Risk	Risk Scoring Grid								
	Critical	5	10	15	20	25			
	Major	4	8	12	16	20			
	Moderate	3	6	9	12	15			
Impact	Minor	2	4	6	8	10			
l E	Insignificant	1	2	3	4	5			
		Very Low / Very remote	Low / Remote	Medium / Possible	High / Probable	Very High / Almost Certain			
	Probability								

Risk Exposure Rating

Risks are prioritised as to where they fall on the Risk Scoring Grid:

Priority 1 Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which may have a serious impact on the Partnership and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Priority 2 There are significant risks, which may have a serious Priority 4 Appropriate controls keep the risk low / negligible. These impact on the Partnership or Service Delivery and the achievement of its objectives if not managed. Immediate management action needs to be taken to reduce the level of net risk.

Priority 3 Risk is manageable after controls have been applied. Although usually accepted, these risks may require some additional mitigating to reduce probability if this can be done cost effectively. Reassess to ensure conditions remain the same and existing actions are operating effectively.

risks are being effectively managed and any further action to reduce the risk would be inefficient in terms of time and resources. Ensure conditions remain the same and existing actions are operating effectively.

Controls and Actions

Where controls have been put in place to treat a risk, consideration is given on how this will affect the risk:

- Reduces impact of the consequences should the risk materialise
- Reduces the probability of the risk occurring

The effectiveness of the controls are rated to determine any actions required to ensure effectiveness via the scale set out in table 2 below:

Table 2.

Con	Controls					
D	Significant Controls do not exist or have broken down					
С	Significant controls not operating effectively					
В	Not all controls are fully effective					
Α	Controls are working effectively					