

Perth & Kinross Health and Social Care Partnership Strategic Risk Register



No.	Risk Ref.	Risk	Risk Owner	Pric	ority	Status
1	<u>SR01</u>	FINANCIAL RESOURCES: There are insufficient financial resources to deliver the objectives of the Strategic Plan.	Head of Finance and Corporate Services	1	Very High	< >
2	<u>SR02</u>	WORKFORCE: 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.	Acting Head of Service ASWSC Operations	1	Very High	()
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 Health	1	Very High	()
4	<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.	Acting Head of Service ASWSC Operations	2	High	←→
5	SR06	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.	Interim Head of Adult Social Care (Commissioning)	1	Very High	()
6	SR08	WIDENING HEALTH INEQUALITIES: As a consequence of COVID-19 there is a risk that health inequalities widen significantly.	Chief Officer	2	High	< >
7	SR09	LEADERSHIP TEAM CAPACITY: 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	2	High	()
8	<u>SR10</u>	CORPORATE SUPPORT: 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 reduce and impede the delivery of strategic objectives.	Head of Finance and Corporate Services	2	High	←→
9	<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	Very High	←→
10	<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	2	High	←→
11	<u>SR14</u>	PARTNERSHIP PREMISES: As a result of a lack of sustainable and suitable premises within which Health and Social Care Services can be delivered, there is a risk that safe, consistent and effective care to patients will not be able to be delivered which could result in a reduction in service capacity, reduced outcomes for people and a reduction in staff wellbeing.	Chief Officer	2	High	←→
<> No 0	change i	n risk exposure	V Decrease i	n risk ex	posure	



SR01: FINANCIAL RESOURCES

Risk Owner: Head of Finance and Corporate Services

Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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

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

↑ INCREASE IN RISK EXPOSURE

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	5
Inherent	Score: 25	Residual	Score: 25

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

Existing Controls:

- A Financial Plan is approved annually as part of a 3 Year Financial Plan.
 This includes an efficiency savings and service redesign programme to support long term sustainability.
- 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
- 3 year strategic delivery plans in place with financial frameworks ensuring an effective link between strategic and financial planning.
- Risk Sharing arrangements between statutory partners have been agreed via the approval of the PKIJB Integration Scheme.

Risk Overview:

The scale of budget pressures forecast for 2023/24 for pay and prices is well in excess of the indicative plan and difficult decisions lie ahead around potential contraction of existing strategic plans. Both partner bodies are facing significant financial challenges. Further the Scottish Government itself has indicated significant financial pressures and a number of actions are already being taken by them to reduce funding to HSCPs in 2022/23 including the proposed claw back of COVID Reserves; reductions in Primary Care Improvement Funding, the Alcohol and Drug Partnership, and a clear indication of funding cuts to Mental Health Services.

The risk exposure therefore remains extreme.

Existing control rating: A – Controls are working effectively.



SR02: WORKFORCE

Risk Owner: Acting Head of Service ASWSC Operations

Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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 IN RISK EXPOSURE

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	5	5	5	
Inherent	Score: 25	Residual Score: 25		

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

Existing Controls:

- Established, robust recruitment processes in place within statutory partner organisations
- HSCP 3 year workforce plan in place and being implemented.
- Production and implementation of Older People's Strategic Delivery Plan 2022:2025 which sets out significant investment in additional staff to respond to increases in demand.

Risk Overview:

Shortages in the available workforce is recognised nationally in respect to Health and Care Services generally and this is particularly the case in some specific sectors. Although the current controls seek to reduce our exposure, their effect is limited by the acute nature of this risk when considering, for example, rising demands for services and the age profile of our workforce.

The completion of our 3 year workforce plan has demonstrated the challenge the Partnership faces. The increasing age of our workforce and demanding demographic issues shows that significant work is required to mitigate the risk. The implementation of the actions in the plan are underway but will take some time to have the significant impact expected.

As the impact of Covid 19 recedes the risk due to the pandemic has reduced. However, there are still significant numbers of vacancies, especially in nursing so the residual risk remains extreme. Potential contractions of budgets may increase this risk further, especially if it impacts on the number of frontline posts.

Existing control rating: C - Significant Controls not operating effectively



SR04: SUSTAINABLE CAPACITY AND FLOW

Risk Owner: Head of Health Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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
- 5. Person-centred fleatin, care and support

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

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

PRIORITY 1

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

←→ NO CHANGE IN RISK EXPOSURE

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 5		
Inherent	Score: 25	Residual	Score: 25	

	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:

- HSCP Capacity and Flow strategic portfolio provides local management, ownership and control of the whole system that supports capacity and flow through our services
- 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.
- 3 Year Strategic Delivery Plan for Older People's Services

Risk Overview:

The Strategic Delivery Plan for Older People is now being implemented. This will, in time, address issues that demographic growth presents and ensure capacity across the system is sufficiently robust in a sustainable manner.

Care at Home capacity has a direct impact on capacity and flow. The review of the Care at Home delivery model is a key action on the Older People Strategic Delivery Plan and the key improvement action to mitigate this risk. This improvement action is anticipated to begin to have an impact on capacity and flow by the end of November when new teams are implemented and anticipated to be able to absorb some of the unmet need currently being experienced.



SR05: SUSTAINABLE DIGITAL SOLUTIONS

Risk Owner: Acting Head of Service ASWSC Operations

Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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



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 Probability (1-5)	Residual Impact (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		
Impact	Insignificant	1	2	3	4	5		
		Very Low	Low	Medium	High	Very High		
	Probability							

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.
- Governance framework for the delivery of the digital strategy across the Partnership in place.
- Digital strategies of the IJB's Statutory Partners.

Risk Overview:

The inherent risk of insufficient digital enablement is extreme; however the effectiveness of existing controls has reduced our risk exposure from the inherent score.

Improvement actions have been identified with a governance framework for the delivery of the digital strategy across the Partnership now completed. The Steering Group and Strategy Group are meeting regularly and directing the need for change as expected.

Regular quarterly reporting from the Digital/TEC Steering Group to EMT is planned with the forward plan for strategies, including Digital/TEC, under development.

NHST and PKC have both developed digital strategies which, together with their ongoing implementation, have reduced the residual risk.



SR06: VIABILITY OF EXTERNAL PROVIDERS

Risk Owner: Interim Head of Adult Social Care (Commissioning)

Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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 1

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

←→ NO CHANGE IN RISK EXPOSURE

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

	Critical	5	10	15	20	25		
	Major	4	8	12	16	20		
Impact	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:

- 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
- Strategic Planning Group remit ensures connectivity to activity within communities with a wide range of stakeholders from each locality are represented in each meeting and that actions coming from this group are in sync with our Strategic Commissioning Plan intentions and are meaningful and related to improved outcomes for those living in Perth and Kinross.
- 3 Year Strategic Delivery Plan for Older People's Services in place with a range of improvements and investments which seeks to enhance the viability of external providers.

Risk Overview:

The review and delivery of the new Care at Home model remains in progress.

The cost of living crisis is now the biggest risk to the viability of our external providers with large increases in expenditure on utilities and a reduction in Scottish Government funding. Temporary measures are being considered to try to minimise this but many influencing factors are not controllable.

Existing control rating: C - Significant controls not operating effectively



Appendix 4

SR08: WIDENING HEALTH INEQUALITIES

Risk Owner: Chief Officer

Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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. 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 IN RISK EXPOSURE

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 Probability (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	
mpact	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:

- Strategic Commissioning Plan 2019 documents the strategic ambitions of the IJB including those which relate to health inequalities.
- 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:

Some progress made in planning for improved working with Community Planning Partners on how we can determine how best to reduce inequalities.

This risk and associated improvement actions is scheduled to be updated so as to address our legal obligations under the Equality Act (2010).



SR09: LEADERSHIP TEAM CAPACITY

Risk Owner: Chief Officer Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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 2

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

←→ NO CHANGE IN RISK EXPOSURE

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 Probability (1-5)	Residual Impact (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	
Impact	Minor	2	4	6	8	10	
lmp	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

Risk Overview:

The IJB approved proposals and the funding solution to establish posts within Head of Service teams on a substantive basis from 2022. This is ongoing and the risk score remains above appetite whilst this remains the case.



SR10: CORPORATE SUPPORT

Risk Owner: Head of Finance and Corporate Services

Date Added to Register: 9 Oct 2022

Review Date: 9 Oct 2022

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 reduce and impede the delivery of strategic objectives.

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

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

PRIORITY 2

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

NO CHANGE IN RISK EXPOSURE

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 Probability (1-5)	Residual Impact (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	
Impact	Minor	2	4	6	8	10	
lmp	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
- The Annual Budget Setting Process captures all essential pressures/ investments including essential corporate support needs.
- Approval of the IJB for additional investment in senior capacity across Corporate Support and Service Management.

Risk Overview:

This strategic risk, added to the risk register in October 2020, was archived in August 2022 after EMT were informed that increased corporate support capacity was either in place, or being actively recruited to, and this no longer therefore presented a risk to the strategic aims of the IJB.

However, there are indications from our parent bodies and Scottish Government that funding to the IJB is likely to be significantly reduced as a result of the significant budget challenges they are facing. This is outlined in SR01 Financial Resources. It is important that the HSCP reconsiders the financial implications of continuing to recruit to new and additional posts within the partnership that are not associated with front line delivery. This includes corporate support functions and there has been a decision to pause recruitment while there is further consideration of how the roles can be fulfilled in a different way while the budget settlement for the IJB from 2023/4 is finalised.



SR11: PRIMARY CARE

Risk Owner: Clinical / Associate Medical Director Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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

←→ NO CHANGE IN RISK EXPOSURE

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)	
4	4	4	4	
Inherent	Score: 16	Residual Score: 16		

	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:

- 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.



SR13: INPATIENT MENTAL HEALTH SERVICES

Risk Owner: Chief Officer Date Added to Register: 22 Oct 2020

Review Date: 27 Oct 2022

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 2

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

←→ NO CHANGE IN RISK EXPOSURE

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)	
4	4	4	3	
Inherent	Score: 16	Residual Score: 12		

	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:

- 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
- Revised Perth and Kinross Integration Scheme approved by statutory partners.

Risk Overview:

The complex governance arrangements concerning Inpatient Mental Health Services meant that the inherent risk exposure was extreme. There has been a significant review of the Integration Scheme, and this provides clarity on roles and responsibilities for mental health and learning disabilities services in Tayside. It is now clear that Perth and Kinross Integration Joint Board has the lead coordinating role for strategic planning and commissioning of the delivery on inpatient mental and learning disability services. Dundee and Angus IJBs are also clear that they hold a duty to plan and commission for this delegated function and that they must collaborate with P&K IJB along with NHS Tayside to achieve this effectively. Further plans to bring together NHST and the 3 IJBs together in a workshop to determine how this will be operationalised will take place in 2023. Actions from a PKHSCP hosted Tayside-wide workshop in relation to the collective management of Mental Health risks is ongoing. It is anticipated that this will inform a reframing of this strategic risk.

Existing control rating: A - Controls are working effectively



SR14: PARTNERSHIP PREMISES

Risk Owner: Chief Officer Date Added to Register: 22 Jul 2021

Review Date 27 Oct 2022

Description of Risk: As a result of a lack of sustainable and suitable premises within which Health and Social Care Services can be delivered, there is a risk that safe, consistent and effective care to patients will not be able to be delivered which could result in a reduction in service capacity, reduced outcomes for people and a reduction in staff wellbeing.

Risk Related to Achievement of Strategic Aim:

- 1. Working together with our communities
- 2. Prevention and Early Intervention
- 3. Making best use of available facilities, people and other resources

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

PRIORITY 2

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

▶ DECREASE IN RISK EXPOSURE

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)	
4	5	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	
Impact	Insignificant	1	2	3	4	5	
_		Very Low	Low	Medium	High	Very High	
	Probability						

Existing Controls:

- Corporate support arrangements provided by HSCP Statutory Partners who support the delivery of accommodation needs.
- HSCP membership of Statutory Partner Capital Asset Groups.
- HSCP representation on PKC office/accommodation group.
- Formal and informal lease agreements/arrangements for current Partnership premises in place
- HSCP involvement in One Public Estate forum.

Risk Overview:

There are a range of accommodation issues in respect to HSCP services which taken together combine to create this strategic risk. The issues affect a range of services and relate to the following:

- Services at risk of displacement from their current location.
- Services operating from premises which are sub-optimal in design or size.
- Services located inconveniently for patients and service users.

A partnership approach to addressing public sector accommodation needs is now being progressed across P&K. This will involve public sector bodies coming together to seek a more holistic solution via the One Public Estate forum. The current and future needs of the HSCP are now articulated and understood with property services in NHST and PKC. There is appropriate representation on the Strategic Asset Management Groups of our statutory partners.



Inherent Residual **Risk Rating Matrix** Score Score Risk Ref. Risk **Risk Title Risk Owner** Exposure -Jun 21 Jul 21 Aug 21 Sep 21 Oct 21 Nov 21 Dec 21 Jan 22 Feb 22 Mar 22 Apr 22 May 22 Jun 22 Jul 22 Aug 22 Sep 22 Oct 22 no controls 20 (5x4) 15 (5x3) 15 (5x3) 15 (5x3) 20 (5x4) 20 (5x4) 20 (5x4) 20 (5x4) Head of Finance and 25 (5x5) 20 (5x4) 25 (5x5) 1 **SR01** Financial Resources **Corporate Services** RED RED **RED** RED **RED RED** RED RED RED **AMBER AMBER AMBER RED** RED RED **RED** RED 25 (5x5) 20 (5x4) 20 (5x4) 20 (5x4) 25 (5x5) 25 (5x5) 25 (5x5) 25 (5x4) 20 (5x4) 25 (5x5) 25 (5x5) 25 (5x4) 2 **SR02** Workforce Heads of Service RED RED RED RED RED **RED** RED RED RED RED RED RED RED RED RED **RED** RED RED 20 (5x5) 20 (5X4) 20 (5X4) 20 (5X4) 25 (5X5) 25 (5X5) 25 (5X5) Sustainable Capacity And 20 (5X4) 25 (5X5) 25 (5X5) 25 (5X5) 25 (5X5) 3 **SR04** Head of Health RED Flow RED RED RED RED RED RED RED Sustainable Digital Acting Head of Service ASWSC 20 (5x4) 12 (4X3) 4 **SR05** Solutions Operations RED **AMBER AMBER AMBER** 25 (5x5) 8 (4x2) 8 (4x2) 8 (4x2) 8 (4x2) 16 (4x4) 20 (4x5) 20 (4x5) 20 (4x5) 20 (4x5) 20 (4x5) 20 (4x5) Viability Of External Interim Head of Adult Social 5 **SR06** Care (Commissioning) RED YELLOW **YELLOW** YELLOW **YELLOW** RED **Providers** Widening Health 20 (4x5) 12 (3X4) 6 **SR08** Chief Officer RED **AMBER AMBER AMBER AMBER AMBER AMBER AMBER AMBER AMBER** AMBER **AMBER AMBER AMBER AMBER AMBER AMBER AMBER** Inequalities 12 (4x3) 12 (4x3) Leadership Team 20 (5x4) 12 (4x3) 12 (4x3) 12 (4x3) 12 (4x3) 12 (4x3) 12 (4x3) 16 (4x4) 12 (4x3) 7 **SR09** Chief Officer **AMBER AMBER** AMBER **AMBER AMBER AMBER** RED **AMBER AMBER AMBER AMBER AMBER** RED **AMBER AMBER AMBER AMBER AMBER** Capacity 20 (5x4) 12 (4x3) 16 (4x4) 12 (4x3) 12 (4x3) 12 (4x3) 8 (4x2) 8 (4x2) 8 (4x2) Head of Finance and 12 (4x3) 8 **SR10** ARCHIVED Corporate Support RED **AMBER AMBER AMBER AMBER AMBER AMBER AMBER** RED **AMBER AMBER AMBER YELLOW** YELLOW **YELLOW AMBER Corporate Services** Clinical / Associate Medical 16 (4x4) 9 <u>SR11</u> **Primary Care** RED Director RED Inpatient Mental Health 16 (4x4) 9 (3x3) 16 (4x4) 12 (4x3) 10 **SR13** Chief Officer Services RED YELLOW **YELLOW** YELLOW YELLOW YELLOW YELLOW YELLOW YELLOW **RED AMBER AMBER AMBER AMBER AMBER** AMBER **AMBER AMBER** 20 (4x5) 16 (4x4) 12 (4x3) 12 (4x3) 12 (4x3) 12 (4x3) 12 (4x3) 11 **SR14** Partnership Premises Chief Officer RED RED **RED** RED RED RED RED RED RED **RED** RED RED **RED AMBER AMBER AMBER AMBER AMBER**



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			
<u>E</u>	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 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.

Priority 4 Appropriate controls keep the risk low / negligible. These 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.

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