



# Perth & Kinross Health and Social Care Partnership Strategic Risk Register

Risk Ref.	Risk	EMT Risk Owner	Priority	Status
<a href="#">SR01</a>	<b>FINANCIAL RESOURCES:</b> There are insufficient financial resources to deliver the objectives of the Strategic Plan.	Head of Finance and Corporate Services	1	↔
<a href="#">SR02</a>	<b>WORKFORCE:</b> 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.	Heads of Service	1	↔
<a href="#">SR03</a>	<b>SAFE WORKING:</b> 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	1	↔
<a href="#">SR04</a>	<b>SUSTAINABLE CAPACITY AND FLOW:</b> 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	↔
<a href="#">SR05</a>	<b>SUSTAINABLE DIGITAL SOLUTIONS:</b> 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.	Interim Head of Adult Social Care (Commissioning)	2	↔
<a href="#">SR06</a>	<b>VIABILITY OF EXTERNAL PROVIDERS:</b> 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)	3	↔
<a href="#">SR07</a>	<b>INSUFFICIENT PREPAREDNESS FOR FUTURE COVID-19 (OR OTHER PANDEMIC) PRESSURES:</b> 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	4	↔
<a href="#">SR08</a>	<b>WIDENING HEALTH INEQUALITIES:</b> As a consequence of COVID-19 there is a risk that health inequalities widen significantly.	Chief Officer	2	↔
<a href="#">SR09</a>	<b>LEADERSHIP TEAM CAPACITY:</b> 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	↔
<a href="#">SR10</a>	<b>CORPORATE SUPPORT:</b> 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.	Head of Finance and Corporate Services	2	↔
<a href="#">SR11</a>	<b>PRIMARY CARE:</b> 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	↔
<a href="#">SR12</a>	<b>EU WITHDRAWAL:</b> 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	4	↔
<a href="#">SR13</a>	<b>INPATIENT MENTAL HEALTH SERVICES:</b> 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	↔
<a href="#">SR14</a>	<b>PARTNERSHIP PREMISES:</b> Due to a lack of sustainable and suitable premises within which Health and Social Care Services can be delivered, there is a risk that services will be displaced without appropriate alternative accommodation having been developed or identified, resulting in a reduction in service capacity, reduced outcomes of patients and service users and a reduction in staff wellbeing.	Chief Officer	16	↔

<> No change in risk exposure

↑ Increase in risk exposure

↓ Decrease in risk exposure

# Perth & Kinross Health and Social Care Partnership

## SR01: FINANCIAL RESOURCES

**Risk Owner:** Head of Finance and Corporate Services

**Date Added to Register:** 22 Oct 2020

**Review Date:** 19 Aug 2021

**Frequency of Review:** 4 weekly minimum

**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:** (↑, ↔, ↓)

**↔ 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	4
<b>Inherent Score: 25</b>		<b>Residual Score: 20</b>	

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

### 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

### 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.

The rapid development of 3 Year Strategic Delivery Plans across services considering the implications of Covid and the service redesign required to respond to demographic growth and increased complexity in an integrated way will be key to ensuring ongoing financial sustainability. However progress may be impacted by the ongoing demands of the Pandemic.

The Financial Risk Sharing arrangement currently in place between NHS Tayside and Perth & Kinross Council has led to very separate considerations of the financial sustainability of PKIJB by each partner separately rather than collectively and the current review of Integration Schemes across Tayside provides the opportunity to move this forward

**Existing control rating:** **A** – Controls are working effectively.

# Perth & Kinross Health and Social Care Partnership

## SR02: WORKFORCE

Risk Owner: Heads of Service

Date Added to Register: 22 Oct 2020

Review Date: 19 Aug 2021

Frequency of Review: 4 weekly minimum

**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: (↑, ↔, ↓)

↔ 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)	Impact	Critical	5	10	15	20	25
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					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
Inherent Score: 25		Residual Score: 20		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
- HSCP 1 year workforce plan for 2021/22 in place.

### Risk Overview:

The extreme pressures experienced through the Covid pandemic has exasperated shortages in the availability of suitably qualified and experienced staff to sustain services. 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, rising demands for services and the age profile of our workforce.

The completion of our 1 year 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 risk therefore remains extreme.

Contingency plans are in place for areas experiencing acute shortages.

Existing control rating: **C** - Significant Controls not operating effectively

## SR03: SAFE WORKING

Risk Owner: Head of Health

Date Added to Register: 22 Oct 2020

Review Date: 19 Aug 2021

Frequency of Review: 4 weekly minimum

**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 1**

Risk Movement: (↑, ↔, ↓)

↔ 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)	Impact	Critical	5	10	15	20	25
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				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	
<b>Inherent Score: 25</b>		<b>Residual Score: 16</b>		<b>Probability</b>						

### 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.
- PKHSCP Gold Command re-established.

### 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 initially reduced the risk exposure to a manageable level.

As services have remobilised, a significant lack of clinical and general accommodation capacity has emerged in some services/sites due to social distancing required to maintain safety and additionally due to how service delivery has changed as a result of the pandemic. This remains an extreme risk to the delivery of our strategic aims.

The Partnership continues to engage with statutory partners to maintain control effectiveness and to progress a sustainable approach ensuring sufficient and appropriate premises and infrastructure are in place.

Existing control rating: **C** – Significant controls not operating effectively

# Perth & Kinross Health and Social Care Partnership

## SR04: SUSTAINABLE CAPACITY AND FLOW

Risk Owner: Head of Health

Date Added to Register: 22 Oct 2020

Review Date: 19 Aug 2021

Frequency of Review: 8 weekly minimum

**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 1**

**Risk Movement:** (↑, ↔, ↓)

↔ **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)	Impact	Critical	5	10	15	20	25
5	5	5	4		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
<b>Inherent Score: 25</b>		<b>Residual Score: 20</b>		<b>Probability</b>						

### 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.
- PKHSCP Gold Command re-established.

### 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 control the risk below an extreme level.

A contingency plan is in place as are new procedures to ensure the appropriate and best use of senior clinical leadership capacity.

The development of 3 Year Strategic Delivery Plan will be progressed for Older People's Services. This will include the review of current approved plans, analysis of Covid-19 impact and remobilisation requirements.

Existing control rating: **B** - Not all controls are fully effective

# Perth & Kinross Health and Social Care Partnership

## SR05: SUSTAINABLE DIGITAL SOLUTIONS

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

**Date Added to Register:** 22 Oct 2020

**Review Date:** 22 July 2021

**Frequency of Review:** 8 weekly minimum

**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:** (↑, ↔, ↓)

**↔ 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)	Impact	Critical	5	10	15	20	25
5	4	4	3		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	
<b>Inherent Score: 20</b>		<b>Residual Score: 12</b>		<b>Probability</b>						

### 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.

### 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 and clear timelines for the delivery of the other actions in place.

**Existing control rating:** **B** - Not all controls are fully effective

# Perth & Kinross Health and Social Care Partnership

## SR06: VIABILITY OF EXTERNAL PROVIDERS

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

Date Added to Register: 22 Oct 2020

Review Date: 19 Aug 2021

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 3**

**Risk Movement:** (↑, ↔, ↓)

↔ **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)	Impact	Critical	5	10	15	20	25
5	5	4	2		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
<b>Inherent Score: 25</b>		<b>Residual Score: 8</b>		<b>Probability</b>						

### 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
- 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.

### Risk Overview:

Providers have coped very well with the impact of Covid and are beginning to emerge and prepare for some sense of normality. No providers have proved unviable throughout the pandemic. Some turnover in staffing has happened although this is not to the extent that service delivery is anticipated to be impacted.

The risk exposure has therefore decreased and the risk will continue to be monitored as per the schedule.

**Existing control rating:** A – Controls are working effectively



# Perth & Kinross Health and Social Care Partnership

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

**Risk Owner:** Chief Officer  
**Date Added to Register:** 22 Oct 2020  
**Review Date:** 24 May 2021  
**Frequency of Review:** 6 monthly minimum

**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:** (↑, ←, →, ↓)  
**PRIORITY 4**  
**↔ NO CHANGE IN RISK EXPOSURE**

**Risk Exposure Rating 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.

Inherent Impact (1-5)	Inherent Probability (1-5)	Residual Impact (1-5)	Residual Probability (1-5)	Impact	Critical	5	10	15	20	25
5	5	5	1		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
<b>Inherent Score: 25</b>		<b>Residual Score: 5</b>		<b>Probability</b>						

**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 and the completion of a review of the Command structure the level of risk has been reduced to priority 4.

**Existing control rating:** **A** - Controls are working effectively

# Perth & Kinross Health and Social Care Partnership

## SR08: WIDENING HEALTH INEQUALITIES

Risk Owner: Chief Officer

Date Added to Register: 22 Oct 2020

Review Date: 22 July 2021

Frequency of Review: 8 Weekly minimum

**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:** (↑, ↔, ↓)

↔ **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)	Impact	Critical	5	10	15	20	25
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					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
<b>Inherent Score: 20</b>		<b>Residual Score: 12</b>		<b>Probability</b>						

### 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. Existing controls which are in place to mitigate this risk are assisting us to better understand where inequalities exist.

Some progress made in planning for improved working with Community Planning Partners on how we can determine how best to reduce inequalities. However the proposed risk score remains unchanged as this has not yet been progressed to completion.

**Existing control rating:** **B** - Not all controls are fully effective

## SR09: LEADERSHIP TEAM CAPACITY

Risk Owner: Chief Officer

Date Added to Register: 22 Oct 2020

Review Date: 22 July 2021

Frequency of Review: 8 weekly minimum

**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:** (↑,↔,↓)

↔ **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.

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				Insignificant	1	2	3	4	5	
					Very Low	Low	Medium	High	Very High	
<b>Inherent Score: 20</b>		<b>Residual Score: 12</b>		<b>Probability</b>						

### 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:

The Chief Officer has engaged with Staff Side and HR to progress the planned Leadership restructure over the coming months, in the context of both statutory partners' Organisational Change Policies. This will endeavour to ensure adequate capacity across the organisation in response to the deficits identified in the Joint Inspection Report, the Annual Governance review and previous Audit Reports.

Existing control rating: **B** - Not all controls are fully effective

# Perth & Kinross Health and Social Care Partnership

## SR10: CORPORATE SUPPORT

**Risk Owner:** Head of Finance and Corporate Services

**Date Added to Register:** 22 Oct 2020

**Review Date:** 22 July 2021

**Frequency of Review:** 8 weekly minimum

**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 2**

**Risk Movement:** (↑, ↔, ↓)

↔ **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.

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						Very Low	Low	Medium	High	Very High
<b>Inherent Score: 20</b>		<b>Residual Score: 12</b>		<b>Probability</b>						

### 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. The Chief Officer is now working with the Executive Management Team to progress a restructure of the HSCP that will seek to ensure adequate capacity across the organisation to improve functioning and effectiveness and address identified capacity shortfalls, within available finance. Fixed term resources for key priority areas such as workforce planning, performance and wider planning will be recruited within available resources to mitigate risk in the short term whilst the restructure progresses.

**Existing control rating:** **B** - Not all controls are fully effective

# Perth & Kinross Health and Social Care Partnership

## SR11: PRIMARY CARE

Risk Owner: Clinical / Associate Medical Director

Date Added to Register: 22 Oct 2020

Review Date: 19 Aug 2021

Frequency of Review: 4 weekly minimum

**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)

Risk Movement: (↑, ↔, ↓)

**PRIORITY 1**

↔ **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)	Impact	Critical	5	10	15	20	25
4	4	4	4		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
<b>Inherent Score: 16</b>		<b>Residual Score: 16</b>		<b>Probability</b>						

### 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.

Existing control rating: **C** - Not all controls are fully effective

## SR12: EU WITHDRAWAL

Risk Owner: Heads of Service

Date Added to Register: 22 Oct 2020

Review Date: 24 May 2021

Frequency of Review: 6 monthly minimum

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

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

**PRIORITY 4**

**Risk Movement:** (↑, ↔, ↓)

↔ **NO CHANGE IN RISK EXPOSURE**

**Risk Exposure Rating 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.

Inherent Impact (1-5)	Inherent Probability (1-5)	Residual Impact (1-5)	Residual Probability (1-5)	Impact	Critical	5	10	15	20	25
4	4	4	1		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	
<b>Inherent Score: 16</b>		<b>Residual Score: 4</b>		<b>Probability</b>						

### 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 was extreme. The controls which are in place combined with the emergent trade agreement have allowed the risk to be effectively managed. The risk will continue to be monitored over the coming months to ensure the exposure remains the same.

Existing control rating: **A** - Controls are working effectively

# Perth & Kinross Health and Social Care Partnership

## SR13: INPATIENT MENTAL HEALTH SERVICES

Risk Owner: Chief Officer

Date Added to Register: 22 Oct 2020

Review Date: 19 Aug 2021

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:** (↑, ↔, ↓)

↔ **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)	Impact	Critical	5	10	15	20	25
4	4	3	3		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	
<b>Inherent Score: 16</b>		<b>Residual Score: 9</b>		<b>Probability</b>						

### 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

# Perth & Kinross Health and Social Care Partnership

## SR14: PARTNERSHIP PREMISES

Risk Owner: Chief Officer

Date Added to Register: 22 Jul 2021

Review Date: 19 Aug 2021

Frequency of Review: 4 weekly

**Description of Risk:** Due to a lack of sustainable and suitable premises within which Health and Social Care Services can be delivered, there is a risk that services will be displaced without appropriate alternative accommodation having been developed or identified, resulting in a reduction in service capacity, reduced outcomes of patients and service users 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 1**

Risk Movement: (↑, ↔, ↓)

↔ **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)	Impact	Critical	5	10	15	20	25
4	5	4	4		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
<b>Inherent Score: 20</b>		<b>Residual Score: 16</b>		<b>Probability</b>						

### 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 options' appraisal for Beechgrove site.

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

Actions to mitigate this emerging risk are being considered as a matter of urgency. In particular the need for a premises and infrastructure plan to support our established and future models of services delivery has been identified. We are seeking to appoint an appropriate professional on a consultancy basis to progress this urgent piece of work.

Existing control rating: **C** - Significant controls not operating effectively



# Perth & Kinross Health and Social Care Partnership

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
<a href="#">SR01</a>	Financial Resources	Head of Finance and Corporate Services	25 (5x5) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED				
<a href="#">SR02</a>	Workforce	Heads of Service	25 (5x5) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED	20 (5x4) RED				
<a href="#">SR03</a>	Safe Working	Head of Health	25 (5x5) RED	9 (3x3) YELLOW	9 (3x3) YELLOW	9 (3x3) YELLOW	16 (4x4) RED	16 (4x4) RED	16 (4x4) RED	16 (4x4) RED				
<a href="#">SR04</a>	Sustainable Capacity And Flow	Head of Health	20 (5x5) RED	15 (5X3) AMBER	15 (5X3) AMBER	15 (5X3) AMBER	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED	20 (5X4) RED				
<a href="#">SR05</a>	Sustainable Digital Solutions	Interim Head of Adult Social Care (Commissioning)	20 (5x4) RED	12 (4X3) AMBER	12 (4X3) AMBER	12 (4X3) AMBER	12 (4X3) AMBER	12 (4X3) AMBER	12 (4X3) AMBER	12 (4X3) AMBER				
<a href="#">SR06</a>	Viability Of External Providers	Interim Head of Adult Social Care (Commissioning)	25 (5x5) RED	15 (5X3) AMBER	15 (5X3) AMBER	15 (5X3) AMBER	8 (4x2) YELLOW	8 (4x2) YELLOW	8 (4x2) YELLOW	8 (4x2) YELLOW				
<a href="#">SR07</a>	Insufficient Preparedness For Future Covid-19 (Or Other Pandemic) Pressures	Chief Officer	25 (5x5) RED	10 (5x2) AMBER	10 (5x2) AMBER	10 (5x2) AMBER	5 (5x1) GREEN	5 (5x1) GREEN	5 (5x1) GREEN	5 (5x1) GREEN				
<a href="#">SR08</a>	Widening Health Inequalities	Chief Officer	20 (4x5) RED	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER	12 (3X4) AMBER				
<a href="#">SR09</a>	Leadership Team Capacity	Chief Officer	20 (5x4) RED	16 (4X4) RED	16 (4X4) RED	16 (4X4) RED	12 (4x3) AMBER	12 (4x3) AMBER	12 (4x3) AMBER	12 (4x3) AMBER				
<a href="#">SR10</a>	Corporate Support	Head of Finance and Corporate Services	20 (5x4) RED	16 (4X4) RED	16 (4X4) RED	16 (4X4) RED	12 (4x3) AMBER	12 (4x3) AMBER	12 (4x3) AMBER	12 (4x3) AMBER				
<a href="#">SR11</a>	Primary Care	Clinical / Associate Medical Director	16 (4x4) RED	16 (4x4) RED	16 (4x4) RED	16 (4x4) RED	16 (4x4) RED	16 (4x4) RED	16 (4x4) RED	16 (4x4) RED				
<a href="#">SR12</a>	EU Withdrawal	Head of Health	16 (4x4) RED	8 (4x2) YELLOW	8 (4x2) YELLOW	8 (4x2) YELLOW	4 (4x1) GREEN	4 (4x1) GREEN	4 (4x1) GREEN	4 (4x1) GREEN				
<a href="#">SR13</a>	Inpatient Mental Health Services	Chief Officer	16 (4x4) RED	9 (3x3) YELLOW	9 (3x3) YELLOW	9 (3x3) YELLOW	9 (3x3) YELLOW	9 (3x3) YELLOW	9 (3x3) YELLOW	9 (3x3) YELLOW				
<a href="#">SR14</a>	Partnership Premises	Chief Officer	20 (4x5) RED						16 (4x4) RED	16 (4x4) RED				

## 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 Scoring Grid						
Impact	Critical	5	10	15	20	25
	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 / 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
C	Significant controls not operating effectively
B	Not all controls are fully effective
A	Controls are working effectively