Appendix 1



Perth & Kinross Health and Social Care Partnership Strategic Risk Register



| Risk Ref. | Risk | EMT Risk Owner | Priority | Status |
|--------------|--|--|-----------|---|
| <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 | ↔ |
| <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. | Heads of Service | 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 | 1 | ↔ |
| <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 | ← → |
| <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. | Interim Head of Adult Social Care (Commissioning) | 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. | Interim Head of Adult Social Care (Commissioning) | 1 | ↑ |
| <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 | 4 | ↔ |
| <u>SR08</u> | WIDENING HEALTH INEQUALITIES: As a consequence of COVID-19 there is a risk that health inequalities widen significantly. | Chief Officer | 2 | ↔ |
| <u>SR09</u> | 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 | ↔ |
| <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 be Service unable to deliver as required to achieve strategic objectives. | Head of Finance and Corporate Services | 2 | ∢→ |
| <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> | EU WITHDRAWAL: 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 | ↔ |
| <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 | ←→ |
| <u>SR14</u> | PARTNERSHIP PREMISES: 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 | 1 | ↔ |
| <> No (| change in risk exposure | | risk expo | sure |



| sk Owner: He | ad of Finance and Co | orporate Services | | | Date Added to Reg Review Date: 28 O Frequency of Revi | ctober 2 | 021 | m | | | |
|---|--|--|---|---|---|---|---|--|---|--|---|
| escription of F | Risk : There are insuffic | cient financial resour | ces to deliver the objec | tives of t | he Strategic Plan | | | | | | |
| isk Related to | Achievement of Stra | tegic Aim: 5. Maki | ng best use of available | facilities | , people and other resour | ces | | | | | |
| | Current Risk | Rating: (priority 1, 2 | 2, 3 or 4) | | | | Risk Mover | ment: (个 | , ←→ , ↓) | | |
| | | PRIORITY 1 | | | | ↔ | NO CHAN | GE IN RIS | SK EXPOSU | RE | |
| he Partnership a | and the achievement o | of its objectives if not | managed. Immediate | controls a managem | nd treatments have been nent action needs to be ta | applied. ken to re | There are signature the level of the second | nificant ris | ks, which may < . | have a ser | ious impact |
| Inherent Impact | Inherent Probability | Residual Impact | Residual Probability | | Critical | | 5 | 10 | 15 | 20 | 25 |
| (1-5) | (1-5) | (1-5) | (1-5) | | Major | | 4 | 8 | 12 | 16 | 20 |
| | | | | act | Moderate | | 3 | 6 | 9 | 12 | 15 |
| 5 | 5 | 5 | 4 | Impa | Minor | | 2 | 4 | 6 | 8 | 10 |
| | | | | , - | Insignificant | | 1 Very Low | 2 Low | 3 Medium | 4 High | 5 Very Hig |
| Inheren | 5554Inherent Score: 25Residual Score: 20 | | | | | | | bability | Wediam | riigii | veryriigi |
| This includent to support to Annual Bud budget revie Effective m through IJB Financial Po item on the An IJB Rese | Plan is approved ann es an efficiency sav ong term sustainability get Negotiation Proce ew/due diligence proce ember and officer w BRG Process osition is reported to e agenda. erves Strategy is in pla ormal meetings with N | rings and service ss (PKC & NHST) is ess orking on develop each meeting of the ace. | redesign programme s supported by robust oment of the Budget IJB and is a standard | The p demo partic the ris overa know be mo The implic increa Howe | Overview: bublic sector economic lan ographic growth places ar cular. Therefore the inhere sk exposure and they are all residual score of the n and may further raise the onitored and assessed at rapid development of a cations of Covid and the ased complexity in an in ever progress may be imp | n increasi ent Finan working risk. Furt ne exposi regular i 3 Year service tegrated acted by | ing pressure cial Resource effectively, h hermore the ure level of th ntervals. Strategic De redesign re way will be | on demand es risk is ex owever the financial ir is risk. As s livery Plan quired to n key to ens demands o | I for health and treme. Contro- ey have a limite mplications of such the risk re- ns across se respond to de uring ongoing of the Pandemi | d social care ls are in pla ed effect in Covid are emains extr rvices cons emographic financial s c. | e services in ce to reduc reducing the not yet full eme and wi sidering the growth an |



| | ads of Service | | | | Date Added to Regist Review Date: 28 Octo Frequency of Review | ber 2021 | ım | | | |
|--|---|--|---|-------------------------------------|---|---|---|--|--|--------------------------------------|
| Description of R Partnership will b | Risk : As a result of our be unable to maintain its | ageing workforce, di s workforce appropri | ifficulties in recruiting suita ately leading to unsustain | ably skill nable ser | ed and experienced staff i vices | n some areas, and | the impact o | f COVID-19, th | ere is a risk | that the |
| Risk Related to | Achievement of Strat | egic Aim: 5. Making | g best use of available fac | cilities, p | eople and other resources | 3 | | | | |
| | Current Risk | Rating: (priority 1, 2 | , 3 or 4) | | | Risk Move | ment: (个, | ←→, ↓) | | |
| | F | PRIORITY 1 | | | | ←→ NO CHAI | IGE IN RIS | K EXPOSUR | E | |
| • | | | ven after all identified continued and the managed. Immediate man | | • | | • | s, which may h | ave a serio | us impact o |
| Inherent | Inherent | Residual | Residual | | Critical | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | Major | 4 | 8 | 12 | 16 | 20 |
| (1-3) | (1-3) | (1-3) | (1-3) | | Moderate | 3 | 6 | 9 | 12 | 15 |
| | | | | Impact | Minor | 2 | 4 | 6 | 8 | 10 |
| 5 | 5 | 5 | 4 | 트 | Insignificant | 1 Very | 2 Low | 3 Medium | 4 High | 5 Very Hig |
| Inherer | nt Score: 25 | Residua | I Score: 20 | | | Low | Probability | medium | | Very m |
| organisation | robust recruitment | | e within statutory partne | er T ti p C c | Risk Overview: The extreme pressures extreme availability of suitably bandemic, shortages in the Care Services generally a current controls seek to re- tisk when considering, for vorkforce. | perienced through v qualified and ex e available workfor nd this is particula educe our exposur | the Covid pa perienced st ce is recognis ly the case in e, their effect | aff to sustain ed nationally i n some specifi is limited by t | services. I n respect to c sectors. A he acute na | Beyond th Health an Ithough th |



| | ad of Health | | | | Date Added to Deviatory O | 2 0 04 2020 | | | | |
|---|----------------------|-------------------------|-------------------------|-----------------|--|-------------------|--------------------|------------------------|---------------|----------------|
| Risk Owner: He | ad of Health | | | | Date Added to Register: 2 Review Date: 28 October 2 Frequency of Review: 4 w | 2021 | n | | | |
| Description of R to achieve its stra | | at COVID-19 restriction | is on safe working pra | actice and so | ocial distancing leads to a red | luction in servic | e provision ir | nhibiting the a | bility of the | Partnership |
| Risk Related to | Achievement of Strat | egic Aim: Making be | st use of available fac | cilities, peopl | e and other resources | | | | | |
| | Current Risk | Rating: (priority 1, 2, | 3 or 4) | | | Risk Mover | nent: (个, 4 | ←→ , ↓) | | |
| | F | PRIORITY 1 | | | ← → | NO CHAN | GE IN RISH | K EXPOSUR | E | |
| | | | | | reatments have been applied action needs to be taken to re | - | | , which may h | nave a serio | us impact o |
| Inherent | Inherent | Residual | Residual | | Critical | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | Major | 4 | 8 | 12 | 16 | 20 |
| (1-3) | (1-3) | (1-3) | (1-3) | _ | Moderate | 3 | 6 | 9 | 12 | 15 |
| _ | _ | | | | Minor Insignificant | 2 | 4 | 6 3 | <u>8</u> 4 | <u>10</u> 5 |
| 5 | 5 | 4 | 4 | <u> ۲</u> | insignitiount | Very Low | Low | Medium | High | Very Hig |
| Inheren | it Score: 25 | Residual | Score: 16 | | | | obability | | | |
| | ols: | | iding oversight of par | rtnership | Risk Overview: Actions put in place near | | of the Could | 10 papdomic | such as the | a completi |



| Impact (1-5)Probability (1-5)Impact (1-5)Probability (1-5)55545554Inherent Score: 25Residual Score: 20Residual Score: 20Risk Overview: The inherent 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.Risk Overview: Risk Overview: The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and Flow whilst Controls are in place to mitigate the likelihood of the r not sufficiently effective to control the risk below an extreme likelihood of the r not sufficiently effective to control the risk below an extreme likelihood of the r not sufficiently effective to control the risk below an extreme likelihood of the r not sufficiently effective to control the risk below an extreme likelihood of the r not sufficiently effective to control the risk below an extreme likelihood of the r not sufficiently effective to control the risk below an extreme likelihood of the r not sufficiently effective to control the risk below an extreme like of senior clinical leadership capacity. The development of 3 Year Strategic Delivery Plan for Older | SR04: SUSTA | INABLE CAPACI | TY AND FLOW | | | | | | | | | |
|---|--|---|--|---|----------------------------------|-----------|---|---|--|--|---|---|
| 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 Risk Rating: (priority 1, 2, 3 or 4) Risk Movement: (↑, ←→, ↓ Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which rule 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 Residual Residual Probability (1-5) (1-5) (1-5) 1 1 2 3 5 5 5 4 1 2 3 6 9 Minor 2 4 6 9 9 1 2 3 6 9 Fisting Controls: - | Risk Owner: Hea | nd of Health | | | | | Review Date: 28 October 2021 | 1 | n | | | |
| 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) Risk Movement: (♠, ←, ↓ PRIORITY 1 Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which is 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 Residual Residual Critical 5 10 15 Major 4 8 12 4 6 9 Minor 2 4 6 9 1 1 2 3 6 9 Minor 2 4 6 9 1 2 3 6 9 Minor 2 4 6 1 2 3 6 9 Minor 2 4 6 1 1 2 3 6 9 1 1 1 2 3 6 <td></td> <td></td> <td></td> <td>people who use our s</td> <td>ervices</td> <td>in Pe</td> <td>rth and Kinross and the impact of</td> <td>f COVID-19</td> <td>on our popu</td> <td>Ilation there is</td> <td>s a risk of 'ca</td> <td>apacity and</td> | | | | people who use our s | ervices | in Pe | rth and Kinross and the impact of | f COVID-19 | on our popu | Ilation there is | s a risk of 'ca | apacity and |
| Right regionering (1/2 2/3) Risk Exposure Rating Priority 1: Risk remains extreme even after all identified controls and treatments have been applied. There are significant risks, which is 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 Residual Residual Residual Residual Residual Critical 5 10 15 5 5 5 4 Major 4 8 12 Moderate 3 6 9 9 9 10 15 10 15 5 5 5 4 1 2 3 6 9 Minor 2 4 6 9 11 2 3 11 2 3 Very Low Media Existing Controls: NHS Tayside Unscheduled Care Board supports capacity and flow through our services NHS Tayside Unscheduled Care Board supports the wider development of strategic direction. The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and Flow of the risk below an extreme linot sufficiently effective to control the risk below an extreme lin | Risk Related to <i>i</i> | | 2.Prev 3. Pers 4. Red | ention and Early Inte son-centred health, ca ucing Inequalities an | rvention are and | ا supp | | althy living | | | | |
| | | Current Risk | Rating: (priority 1, 2, | 3 or 4) | | | Ris | sk Mover | nent: (个, 🕻 | ←→,↓) | | |
| 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 Inherent Residual Impact Residual Probability (1-5) Critical 5 10 15 5 5 5 4 Mior 2 4 6 6 9 Minor 2 4 6 9 6 5 5 4 Mior 2 4 6 1 2 3 6 9 Mior 2 4 6 1 1 2 3 3 6 9 Mior 2 4 6 1 1 2 3 3 1 2 3 3 Inherent Score: 25 Residual Score: 20 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 Risk Overview: The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and Flow. These are reviewed ro | | F | PRIORITY 1 | | | | | | | | E | |
| Impact (1-5)Probability (1-5)Impact (1-5)Probability (1-5)55545554Inherent Score: 25Residual Score: 20Residual Score: 20Risk Overview: The inherent 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.Risk Overview: The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and Flow whilst Controls are in place to mitigate the likelihood of the r not sufficiently effective to control the risk below an extreme le A contingency plan and new procedures are in place to ens use of senior clinical leadership capacity. The development of 3 Year Strategic Delivery Plan for Older | | | | | | | | | | , which may l | nave a serio | us impact on |
| (1-5) (1-5) (1-5) (1-5) (1-5) 5 5 4 3 6 9 Minor 2 4 6 Inherent Score: 25 Residual Score: 20 Insignificant 1 2 3 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 • Risk Overview: The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and Flow risk below an extreme likelihood of the rot sufficiently effective to control the risk below an extreme likelihood of the rot sufficiently effective to control the risk below an extreme likelihood of the rot sufficiently effective to control the risk below an extreme likelihood of the rot sufficiently effective to control the risk below an extreme likelihood of the rot sufficiently effective to control the risk below an extreme likelihood of the rot sufficiently effective to control the risk below an extreme likelihood of the rot sufficiently effective to control the risk below an extreme likelihood of the rot sufficiently effective to control the risk below an extreme likelihood of end rot sufficiently effective to control the risk below an extreme likelihood of end rot sufficiently effective to control the risk below an extreme likelihood of end rot sufficiently effective to control the risk below an extreme likelihood of end rot sufficiently effective to control the risk below an extreme likelihood of end rot sufficiently effective to control the risk below an extreme lise to capacity and Flow. T | | | | | | | Critical | 5 | 10 | 15 | 20 | 25 |
| Middefate 3 6 3 5 5 4 Inherent Score: 25 Residual Score: 20 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 • MISCP Capacity and Flow strategic portfolio provides local management, ownership and control of the whole system that supports capacity and flow through our services • MISCP 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. | | | | | | _ | Major | 4 | 8 | 12 | 16 | 20 |
| Very Low Low Media Inherent Score: 25 Residual Score: 20 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 Risk Overview: The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and F • HSCP Performance Framework details the key performance measures which relate to Capacity and Flow. These are reviewed routinely across the organisation Risk Overview: The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and F • HSCP Performance Framework details the key performance measures which relate to Capacity and Flow. These are reviewed routinely across the organisation A contingency plan and new procedures are in place to ens use of senior clinical leadership capacity. • Winter Planning Group oversees the Winter Plan and ensures that services are fit for purpose. The development of 3 Year Strategic Delivery Plan for Older | (1-5) | (1-5) | (1-5) | (1-5) | | | Moderate | 3 | 6 | 9 | 12 | 15 |
| Very Low Low Media Inherent Score: 25 Residual Score: 20 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 Risk Overview: The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and F • HSCP Performance Framework details the key performance measures which relate to Capacity and Flow. These are reviewed routinely across the organisation Risk Overview: The inherent Capacity and Flow risk is extreme. The Covi have a significant impact operationally on Capacity and F • HSCP Performance Framework details the key performance measures which relate to Capacity and Flow. These are reviewed routinely across the organisation A contingency plan and new procedures are in place to ens use of senior clinical leadership capacity. • Winter Planning Group oversees the Winter Plan and ensures that services are fit for purpose. The development of 3 Year Strategic Delivery Plan for Older | | | | | | act | Minor | 2 | 4 | 6 | 8 | 10 |
| Inherent Score: 25 Residual Score: 20 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 • • HSCP Capacity and Flow strategic portfolio provides local management, ownership 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. • | 5 | 5 | 5 | 4 | | <u> </u> | Insignificant | | 2 | 3 | 4 | 5 |
| 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. | | | | | - | | | | Low | Medium | High | Very High |
| 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. | Inheren | t Score: 25 | Residual | Score: 20 | | | | Pr | obability | | | |
| PKHSCP Gold Command re-established. developed. This will include the review of current approved impact and remobilisation requirements. | HSCP Capa and control of NHS Taysid direction. HSCP Perfor to Capacity a Winter Plann purpose. | city and Flow strateg of the whole system th e Unscheduled Care mance Framework d and Flow. These are re hing Group oversees t | at supports capacity a Board supports the w etails the key perforn eviewed routinely acro he Winter Plan and e | and flow through our s ider development of nance measures whi oss the organisation | services strategi ch relat | ic ie | The inherent Capacity and I have a significant impact or whilst Controls are in place t not sufficiently effective to co A contingency plan and new use of senior clinical leadersh The development of 3 Year developed. This will include | oerationally o mitigate t ntrol the risl procedures nip capacity Strategic D the review | on Capacit he likelihood k below an e are in plac elivery Plan | y and Flow y l of the risk e xtreme level. e to ensure th for Older Pe | within our so vent occurrin ne appropria ople's Servio | ervices and ng, they are ite and best ces is being |



| SR05: SUSTA | INABLE DIGITAL | SOLUTIONS | | | | | | | | | |
|--|--|---|--|---|------------------|---|---|-----------------------------|-------------------------------|----------------------------|---------------|
| Risk Owner: Inte | rim Head of Adult So | ocial Care (Commiss | ioning) | | | Date Added to Register: 22 Oc Review Date: 24 September 20 Frequency of Review: 8 week | 021 | n | | | |
| Description of Ri models of working | | ng insufficiently digital | y enabled or integrat | ed there | e is a | risk that the Partnership will not to | o be able to | adapt effect | ively and effic | ciently to deli | ver new |
| Risk Related to A | Achievement of Strat | 2.Prev 3. Pers | king together with Co ention and Early Inte con-centred health, ca ucing Inequalities an | rvention are and | supp | ort alth outcomes and promoting hea | lthy living | | | | |
| | Current Risk | Rating: (priority 1, 2, | | ľ | | | | nent: (↑ , € | ←→,↓) | | |
| | F | PRIORITY 2 | | | | ←→ N | | GE IN RISK | EXPOSUR | E | |
| | ating Priority 2: The ement action needs to | | | serious | impa | ct on the Partnership or Service I | Delivery and | the achieve | ement of its ob | jectives if no | ot managed. |
| Inherent | Inherent Brokebility | Residual | Residual | | - | Critical | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | - | Major | 4 | 8 | 12 | 16 | 20 |
| (, | (, | (1.0) | (, | | Ħ | Moderate | 3 | 6 4 | 9 | 12 8 | 15 10 |
| _ | | | | | Impact | Minor Insignificant | 1 | 2 | 3 | 4 | 5 |
| 5 | 4 | 4 | 3 | | 5 | məignincanı | Very Low | Low | Medium | High | Very High |
| Inherent | Score: 20 | Residual | Score: 12 | | - | | Pi | robability | | | |
| strategy. PKHSCP TE EMT, EOT, F Members of Digital Transi PKC Informa PKHSCP TE required. Signed Data and between | s: C/Digital Portfolio Str PKC Digital Board. the TEC Digital Strat formation Partnership tion Governance has C Digital Steering Gro Sharing Agreements PKC/NHS NSS/Scott framework for the del | rategic Action Plan is regy Group are memb (TDTP). oversight and supplie oup Scrutinises and e s are in place betwee tish Government. | a scheduled agenda bers of the NHST/LA s guidance. scalates to Strategy ben NHST/PKC/PKH | a item o . Taysid group a SCP/IS | n e s D | Risk Overview: The inherent risk of insufficie of existing controls has reduc Improvement actions have be the digital strategy across t delivery of the other actions in | ed our risk een identifie he Partners | exposure fro | m the inherer ernance fram | nt score. ework for the | e delivery of |



| SR06: VIABIL | ITY OF EXTERNA | AL PROVIDERS | | | | | | | | | |
|--|---|---|--|---|----------------------------|---|--|--|--|---|--|
| Risk Owner: Inte | rim Head of Adult So | ocial Care (Commiss | ioning) | | | Date Added to Register: 22 C Review Date: 9 Nov 2021 Frequency of Review: 8 weel | | | | | |
| | i sk : As a result of soci n the most appropriate | | ions, availability of se | ervices, a | and CC | OVID-19, there is a risk that ext | ernal provide | ers of care w | ill not be able | to meet peo | ople's |
| Risk Related to A | Achievement of Strat | 2. Pre 3. Per 4. Red 5. Mak | ing best use of availa | ervention are and s d unequa | suppo al heal | rt th outcomes and promoting he eople and other resources | althy living | | | | |
| | Current Risk | Rating: (priority 1, 2, | 3 or 4) | | | Ri | isk Moven | nent: (个, | ←→,↓) | | |
| | F | PRIORITY 1 | | | | ↑ | NCREASE | IN RISK E | XPOSURE | | |
| Risk Exposure R Immediate manag | ating Priority 2: The ement action needs to | se are significant risk o be taken to reduce t | s, which may have a he level of net risk. | serious i | mpact | on the Partnership or Service | Delivery and | d the achieve | ement of its ol | bjectives if n | ot managed. |
| Inherent | Inherent | Residual | Residual | | C | Critical | 5 | 10 | 15 | 20 | 25 |
| Impact | Probability | Impact | Probability | | M | /lajor | 4 | 8 | 12 | 16 | 20 |
| (1-5) | (1-5) | (1-5) | (1-5) | | | loderate | 3 | 6 | 9 | 12 | 15 |
| | | | | | mpact | linor | 2 | 4 | 6 | 8 | 10 |
| 5 | 5 | 4 | 4 | | <u><u></u><u></u></u> | nsignificant | 1 | 2 | 3 | 4 | 5 |
| | | | | - | | | Very Low | Low | Medium | High | Very High |
| Inherent | Score: 25 | Residual | Score: 16 | | | | Pr | obability | | | |
| commissione Maintenance regular oppo Care Home provision Commission HSCP COV oversight and Strategic Pla with a wide r and that acti Plan intentio in Perth and | ational contractual a ed services of strong and suppor rtunities to highlight is oversight group whice ed Services Board pro ID-19 Governance d support to ensure su anning Group remit e ange of stakeholders ons coming from this ns and are meaningfu Kinross. | rtive relationships with sues of concern ch provides routine a ovides strategic overs arrangements which ustainability of provide ensures connectivity from each locality are group are in sync with and related to impro- | n providers create ro nd regular monitorin ight of commissioned provide direction, irs to activity within con e represented in each n our Strategic Comm oved outcomes for the | utine and g services scrutiny nmunities n meeting nissioning | d e s y g g | Risk Overview: Providers have coped very unviable to date. Howeve commissioned services a improvement actions Care at Home capacity, es This risk has therefore been identified. | r there are and these pecially in ru | a range o require clo ural P&K, is | f challenges se manager facing particu | with different ment of co ularly severe | ent types of ontrols and challenges. |
| Existing control | rating: C – Signific | ant controls not ope | erating effectively | | | | | | | | |



| SR07: INSUFI | ICENT PREPAR | EDNESS FOR FU | TURE COVID-1 | 9 (OR | OTH | IER PANDEMIC) PRES | SURES | | | | |
|--|--|--|--|-----------------------|---|--|------------------------------|-------------------|--------------------------|--------------|----------------|
| Risk Owner: Chi | ef Officer | | | | | Date Added to Register: Review Date: 24 May 202 Frequency of Review: 6 r | 1 | mum | | | |
| Description of R | sk : Due to the scale c | of future COVID-19 ou | tbreaks being unkno | wn, the | re is a | a risk that preparations to su | stain service | provision will | be insufficient. | | |
| Risk Related to A | Achievement of Strat | | | | | alth outcomes and promotin , people and other resources | | 9 | | | |
| | Current Risk | Rating: (priority 1, 2, | | | | | | ement: (🕇 | , ←→ , ↓) | | |
| | P | PRIORITY 4 | | | | ← - | NO CHA | NGE IN RIS | SK EXPOSUF | RE | |
| | ating Priority 4: App nd resources. Ensure | • • | | | | isks are being effectively ma perating effectively. | naged and ar | y further action | on to reduce th | e risk would | be inefficient |
| Inherent | Inherent | Residual | Residual | | | Critical | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | | Major | 4 | 8 | 12 | 16 | 20 |
| (13) | (13) | (13) | (13) | | ŗ | Moderate | 3 | 6 | 9 | 12 | 15 |
| | | | | | Impact | Minor | 2 | 4 | 6 | 8 | 10 |
| 5 | 5 | 5 | 1 | | Ш | Insignificant | 1 Very | 2 | 3 | 4 | 5 |
| | | | | - | | | Low | Low | Medium | High | Very High |
| Inheren | Score: 25 | Residual | Score: 5 | | | | | Probability | | | |
| staffing short HSCP Work provide assu coordinate th COVID-19 G strong links v sightedness Local Resili Membership | s: force sickness absen ages in light of Scottis force Matching Unit of rance to HSCP Execu e movement between overnance Command vith Statutory partner of emerging issues an ence Partnership ser of this group ensures nks to wider statutory | h Government pande created as part of i itive Leadership of su services where neces I, Control and Comm command structures, d decision making. rves as a Regiona high level insight to a | ponse t es and t includin is syster | o o g n P | Risk Overview: The measures taken to insight into what is need Given the controls which structure the level of risk | ed to sustain are now in p | services desp ace and the | bite the challene | ges faced. | | |

Existing control rating: A - Controls are working effectively



| SR08: WIDEN | ING HEALTH INE | EQUALITIES | | | | | | | | | |
|--|---|---|---|--|----------|--|---|--|---|---|-------------------------------|
| Risk Owner: Chi | ef Officer | | | | F | Date Added to Register: 22 Oo Review Date: 24 September 20 Frequency of Review: 8 Week | 021 | n | | | |
| Description of R | isk: As a consequence | e of COVID-19 there i | s a risk that health in | equalities w | vider | n significantly. | | | | | |
| Risk Related to | Achievement of Strat | | Q | d unequal h | nealt | h outcomes and promoting hea | Ithy living | | | | |
| | Current Risk | Rating: (priority 1, 2, | 3 or 4) | | _ | Ris | sk Mover | nent: (个, 🗲 | ←→, ↓) | | |
| | F | PRIORITY 2 | | | | ←→ № | O CHAN | GE IN RISK | EXPOSUR | E | |
| | tating Priority 2: The gement action needs to | • | • | serious imp | bact | on the Partnership or Service I | Delivery and | the achieve | ement of its ob | pjectives if n | ot managed. |
| Inherent | Inherent | Residual | Residual | | | ritical | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | | lajor | 4 | 8 | 12 | 16 | 20 |
| (1-3) | (1-3) | (1-3) | | | loderate | 3 | 6 | 9 | 12 | 15 | |
| | | mpact | | linor nsignificant | 2 | 4 | 6 3 | 8 | 10 5 | | |
| 4 | 5 | 3 | 4 | = | | Isigninean | Very Low | Low | Medium | 4 High | Very High |
| Inheren | t Score: 20 | Residual | Score: 12 | | | | | obability | | <u> </u> | |
| including the The HSCP services in r The Equalit protected representati and third set Perth and F | Is: commissioning Plan 20 cose which relate to hea COVID-19 Remobilis esponse to the pander ies Strategic Forum groups are represe on across the Commi ctor partners. Kinross Equalities, Er ad Renewal agenda) for | alth inequalities. sation Plan records t mic. provides a platform ented effectively. T unity Planning Partne npowerment and Fai | he actions taken to to ensure that loca his forum contain ership including from rness workstream (\ | mobilise l equality s broad statutory within the | | Risk Overview: The COVID-19 pandemic communities. Existing contro better understand where ined Some progress made in plan on how we can determine h score remains unchanged as | bls which an qualities exi nning for imp how best to | re in place to st. proved worki preduce ine | o mitigate this ng with Comr qualities. How | s risk are as nunity Plann wever the pl | sisting us to ing Partners |

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



| SR09: LEADE | RSHIP TEAM CA | PACITY | | | | | | | | | |
|--|--|---|--|----------|-----------|--|---|--|--|--|--|
| Risk Owner: Ch | ef Officer | | | | | Date Added to Register: 2 Review Date: 24 Septembe Frequency of Review: 8 w | er 2021 | n | | | |
| Description of R achieved. | isk: : As a result of ins | sufficient capacity in t | he Leadership Team | there is | s a risl | that the clear direction and le | eadership requ | ired to achiev | ve the vision f | or integratior | ı is not |
| Risk Related to | Achievement of Strat | tegic Aim: 5. Ma | iking best use of av | vailabl | e faci | lities, people and other res | sources | | | | |
| | Current Risk | Rating: (priority 1, 2, | 3 or 4) | | | | Risk Moven | nent: (个, | ←→,↓) | | |
| | F | PRIORITY 2 | | | | ← → | NO CHAN | GE IN RISI | K EXPOSUR | E | |
| | Rating Priority 2: The gement action needs t | • | • | serious | s impa | ct on the Partnership or Servi | ce Delivery an | d the achieve | ement of its of | pjectives if n | ot managed. |
| Inherent | Inherent | Residual | Residual | | | Critical | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | | Major | 4 | 8 | 12 | 16 | 20 |
| (1-3) | (1-3) | (1-3) | (1-3) | | ÷ | Moderate | 3 | 6 | 9 | 12 | 15 |
| | | | | | mpact | Minor | 2 | 4 | 6 | 8 | 10 |
| 5 | 4 | 4 | 3 | | <u>=</u> | Insignificant | Very Low | 2 Low | 3 Medium | 4 High | 5 Very High |
| Inheren | t Score: 20 | Residual | Score: 12 | | | | | robability | | | - |
| Team Chief Office including dis Regular rep Committee HSCP Covi | Is: or Leadership Team i r meets regularly with cussion on leadership orting on Partnership including key actions t d Gold Command pr support Covid Respons | n Chief Executive of resources Improvement Plan o increase leadership rovide ongoing over | both PKC and NHS to IJB Audit & Perio capacity sight of additional le | Taysi | de ice | Risk Overview: The Chief Officer has deface, it would be prefera the HSCP Leadership. W would not increase leade some considerable time operational management | ble to not now hile restructuri rship capacity our ability to ta | progress a ng EMT wou within the So ake the actio | formal, comp Id achieve mo enior Team. | rehensive re ore integrate Instead, it m | estructure of d working, it ay delay for |



| SR10: CORPO | DRATE SUPPOR | Г | | | | | | | | | |
|--|--|--|---|---|------------------------------|---|--|---|---|--|--|
| Risk Owner: Hea | d of Finance and Co | orporate Services | | | | Date Added to Register: 22 O Review Date: 24 September 2 Frequency of Review: 8 week | 2021 | ı | | | |
| | | | | | | tions such as improvement and p udit, will be unable to deliver as | | | | | re |
| Risk Related to | Achievement of Strat | tegic Aim: 5. Mal | king best use of av | ailable | e facil | ities, people and other resou | irces | | | | |
| | Current Risk | Rating: (priority 1, 2, | 3 or 4) | | | Ri | sk Movem | ent: (个, 4 | ←→,↓) | | |
| | F | PRIORITY 2 | | | | ← → | NO CHAN | GE IN RISH | | RE | |
| | • • | se are significant risks o be taken to reduce t | • | serious | impa | ct on the Partnership or Service | Delivery and | I the achieve | ement of its of | ojectives if no | ot managed. |
| Inherent | Inherent | Residual | Residual | | | Critical | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | - | Major | 4 | 8 | 12 | 16 | 20 |
| (1-3) | (1-3) | (1-3) | (1-3) | | - L | Moderate | 3 | 6 | 9 | 12 | 15 |
| | | | | | Impact | Minor | 2 | 4 | 6 | 8 | 10 |
| 5 | 4 | 4 | 3 | | Ē | Insignificant | 1 Very | 2 | 3 | 4 | 5 |
| | | | | _ | _ | | Low | Low | Medium | High | Very High |
| Inheren | t Score: 20 | Residual | Score: 12 | | | | Pr | obability | | | |
| PKHSCP Corporate Si Chief Office including dis Corporate M Managemen Regular rep Committee PKHSCP Co and suppor Remobilisati The Annual including ess The Covid F | IST have delegated a upport Agreement in p meets regularly with cussion on leadership lanagement Team ov t Team on Corporate orting on Partnership ovid Gold Command ting corporate supp on Budget Setting Proc sential corporate supp Remobilisation Plan P | level of corporate sup place between PKIJB a n Chief Executive of and supporting resouversee regular review Support and prioritisat Improvement Plan provide ongoing over ort required to sup cess captures all ess ort needs. Process captures esseure effective response | and NHST/PKC both PKC and NHS irces v and reporting to f to IJB Audit & Perl rsight of additional le oport Covid Respo ential pressures/ inv | Taysic Executiv rces formanc eadersh nse ar restmen | de ve ce ind its | Risk Overview: External Audit and Inspection levels of corporate support a The Chief Officer's formal re capacity across the organisa forward. There are a high nu basis while restructure is un the HSCP's functioning. The Chief Officer is now wo ensure adequate capacity of review of functions is bei sustainable workforce to cov | across a num estructure of ation is now umber of tem nder conside rking with E can be put i ng undertal | the HSCP w not conside porary posts ration and t MT to progre n place. In the ken and a | reas. hich was plar red the best of s that cannot his is having ess proposals relation to co funded prop | nned to ensur or most appr be filled on a a destabilisin within portfo rporate supp osal for rec | re adequate opriate way a permanent ng effect on polio areas to port, a rapid cruitment of |



| SR11: PRIMA | RY CARE | | | | | | | | | | |
|--|--|--|--|---|--|---|--|--|---|---------------|----------------|
| Risk Owner: Clin | ical / Associate Med | lical Director | | | Date Added to Registe Review Date: 28 Octob Frequency of Review: | per 2021 | | ı | | | |
| | | | | | of available national and cr 2018 General Medical Serv | | | financial sup | port, there is | a risk that w | ve will not be |
| Risk Related to A | Achievement of Strat | 2. Prev 3. Pers 4. Red 5. Mak | ing the best use of a | | | thy living | | | | | |
| | Current Risk | Rating: (priority 1, 2, | 3 or 4) | | | Risl | k Movem | ent: (个, | ←→,↓) | | |
| | F | PRIORITY 1 | | | € | -→ N | O CHANG | GE IN RISH | EXPOSUR | E | |
| | | | | d treatments have been app nt action needs to be taken | | - | | , which may ł | nave a serio | us impact on | |
| Inherent | Inherent Dask skility | Residual | Residual | | Critical | | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | Major Moderate | | <u>4</u> 3 | <u>8</u> | 12 9 | 16 12 | 20 15 | |
| (, | (, | (, | (, | | | 2 | 4 | 9 6 | 8 | 10 | |
| | | | | Minor Insignificant | | 1 | 2 | 3 | 4 | 5 | |
| 4 | 4 | 4 | 4 | - | | | Very Low | Low | Medium | High | Very High |
| Inherent | Score: 16 | Residual | Score: 16 | | | | | obability | | | |
| Implementati Regular enga of new servic The Pan-Tay and delivery NHS Tayside Integration J affecting deli Scottish Gov affecting Locality Man NHS Tayside of Primary C | inross HSCP Primary on of the Primary Car agement with Local M ces in support of the 2 yside 2018 General M of Tayside/HSCP Pro- e Primary Care Board oint Board - annual m very ernment – 6 monthly agement Team meet e governance structure are premises strategic | re Improvement Plan, Medical Committee wh 018 General Medical Medical Services Con grammes considers highlight re eport on Primary Car report on Primary Car regularly to resolve/h e for premises and as c Plan | ment and implementation sists in the management escalation of risks progress and issues/risks | The with of th partn in pla | no single o is requires ners, and e ace but th | nary care se cause or sol a manifolo xternally at a ney are not | ervices relates ution. The col l response in a national leve fully effectiv d. The risk ren | mplex and b ternally with el. Control m e and so ir | proad nature hin statutory leasures are mprovement | | |



| Risk Owner: Hea | ads of Service | | Date Added to Register: 22 Oct 2020 Review Date: 24 May 2021 Frequency of Review: 6 monthly minimum | | | | | | | |
|---|--|--|--|---|---|-------------------|---------------|----------------|--------------|---------------|
| | | | | | sions in place to safeguard ery of Health and Care Se | | taff and redu | ce the effects | of vulnerab | le UK |
| Risk Related to | Achievement of Strat | tegic Aim: 5. Ma | king best use of availa | ble facilities | , people and other resourc | ces | | | | |
| | Current Risk | Rating: (priority 1, 2 | , 3 or 4) | | | Risk Movem | nent: (♠, € | →,↓) | | |
| | F | PRIORITY 4 | | | | | GE IN RISK | | E | |
| Risk Exposure F In terms of time a | Rating Priority 4: App and resources. Ensure | propriate controls kee conditions remain th | p the risk low / negligi e same and existing a | ble. These ctions are o | isks are being effectively r | managed and any f | urther action | to reduce the | risk would | be inefficiei |
| Inherent | Inherent | Residual | Residual | | Critical | 5 | 10 | 15 | 20 | 25 |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | Major | 4 | 8 | 12 | 16 | 20 |
| (1-5) | (1-3) | (1-3) | (1-3) | 5 | Moderate Minor | 3 | 6 4 | <u>9</u> 6 | 12 8 | 15 10 |
| | | | | Impact | Insignificant | 1 | 4 | 3 | 4 | 5 |
| 4 | 4 | 4 | 1 | | morgimicant | Very Low | Low | Medium | High | Very Hig |
| Inheren | t Score: 16 | Residua | al Score: 4 | | | | obability | | | |
| provides dire Perth and direction ar everything fi Tayside Loo coordination organisation HSCP Gove | de EU Exit Group co ection and oversight in Kinross Council Brex nd oversight for all I rom settled status to re cal Resilience Partner n and oversight of | n respect to prepared it Group has HSCI PKC services, facil egulatory services, ca ship Working Group preparedness act s are in place to e | ness. P representation and ities and citizens and are homes and data st o on EU Exit provides oss wider statutory | provides d covers orage. regional partner | Risk Overview: Although the after eff presenting health and | | | | neir implica | tions are no |



| SR13: INPATI | ENT MENTAL HE | EALTH SERVICES | S | | | | | | | | | | |
|---|----------------------|-------------------------|--|---------------------|---|--|---|--|--|--|--|--|--|
| Risk Owner: Chie | ef Officer | | Date Added to Register: 22 Oct 2020 Review Date: 19 Aug 2021 Frequency of Review: 12 weekly | | | | | | | | | | |
| Description of Ri Strategic Planning | | at due to the complexi | ty of the governance a | arrange | ments for Inpatient Mental Health Services Perth and Kinross IJB will not be able to meet its | | | | | | | | |
| Risk Related to A | Achievement of Strat | 2. Prev 3. Pers | king together with our vention and Early Inte son-centred health, ca ucing inequalities and | rventior are and | ר suppo | | Ithy living | | | | | | |
| | Current Risk | Rating: (priority 1, 2, | 3 or 4) | | | Ris | k Movem | ent: (个, 🕻 | ←→,↓) | | | | |
| | P | PRIORITY 3 | | | | | | | K EXPOSUR | E | | | |
| - | | ÷ | - | | | gh usually accepted, these risks actions are operating effectively. | may require | e some addit | ional mitigatir | ng to reduce | probability if | | |
| Inherent | Inherent | Residual | Residual | | _ | Critical | 5 | 10 | 15 | 20 | 25 | | |
| Impact (1-5) | Probability (1-5) | Impact (1-5) | Probability (1-5) | | - | Major | 4 | 8 | 12 | 16 | 20 | | |
| (1-5) | (1-5) | (1-5) | (1-5) | | ÷- | Moderate | 3 | 6 | 9 | 12 | 15 | | |
| | | | | | - a | Minor | 2 | 4 | 6 | 8 | 10 | | |
| 4 | 4 | 3 | 3 | | <u> </u> | Insignificant | 1 Very | 2 | 3 | 4 | 5 | | |
| | | | | | _ | | Low | Low | Medium | High | Very High | | |
| Inherent | Score: 16 | Residual | Score: 9 | | | | Pr | obability | | | | | |
| 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 a meant that the inherent risk e Scheme for all 3 IJBs in Tay this, along with the other of exposure to be reduced to a r The control effectiveness and assessed to ensure the risk re | xposure wa yside will s control mea manageable I the progre | as extreme. Heek to clarif asures curre e level. ass of the rev | However the F y the governa ently in place | Review of the ance arrange, has allow | e Integration ements and ed the risk | | |



| SR14: PARTI | NERSHIP PREMIS | ES | | | | | | | | | | |
|---|---|--|---|-------------|--|---|--|---|---|---|--|--|
| Risk Owner: Ch | ief Officer | | | | Date Added to Register: 22 Jul 2021 Review Date: 28 October 2021 Frequency of Review: 4 weekly | | | | | | | |
| displaced witho | ut appropriate altern | ative accommodati | | | lealth and Social Care Se identified, resulting in a re | | | | | | | |
| | ers and a reduction ir Achievement of Strat | egic Aim: 1. Wor | king together with ou vention and Early Inte | r communiti | es | | | | | | | |
| | Current Risk | | ing best use of availa | | , people and other resource | s Risk Moven | nent: (个 . | → , \) | | | | |
| | F | PRIORITY 1 | | | + ·· | | | EXPOSUR | E | | | |
| • | | | | | treatments have been appli t action needs to be taken to | | | , which may h | nave a serio | us impact o | | |
| Inherent | Inherent | Residual | Residual | | Critical | 5 | 10 | 15 | 20 | 25 | | |
| Impact (1-5) | Probability | Impact (1-5) | Probability | | Major | 4 | 8 | 12 | 16 | 20 | | |
| (1-5) | (1-5) | (1-5) | (1-5) | 4 | Moderate | 3 | 6 | 9 | 12 | 15 | | |
| | | | | mpact | Minor | 2 | 4 | 6 | 8 | 10 | | |
| 4 | 5 | 4 | 4 | <u></u> | Insignificant | 1 Very Low | 2 Low | 3 Medium | 4 High | 5 Very Hig | | |
| Inheren | t Score: 20 | Residual | Score: 16 | | Probability | | | | | | | |
| the delivery HSCP mem HSCP representation Formal and premises in | support arrangements p of accommodation new bership of Statutory Pa esentation on PKC offic informal lease agreem | eds. artner Capital Asset C ce/accommodation gr nents/arrangements fo | Groups. oup. or current Partnership | | - Services operation | eate this strateg k of displacement ating from premis ed inconveniently s emerging risk a premises and ces delivery has | t from their c es which are for patients are being cc infrastructure been ident | urrent location sub-optimal and service u insidered as plan to supp fied. We are | a range of s n. in design or sers. a matter of port our esta seeking to | size. urgency. li blished and appoint ai | | |



Perth & Kinross Health and Social Care Partnership

| Risk | Rating Matrix | Inherent Residual Score 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 | Head of Finance and Corporate Services | 25 (5x5) RED | 20 (5x4) RED | |
| <u>SR02</u> | Workforce | Heads of Service | 25 (5x5) RED | 20 (5x4) RED | |
| <u>SR03</u> | Safe Working | Head of Health | 25 (5x5) RED | 9 (3x3) YELLOW | 9 (3x3) YELLOW | 9 (3x3) YELLOW | 16 (4x4) RED | |
| <u>SR04</u> | Sustainable Capacity And Flow | Head of Health | 20 (5x5) RED | 15 (5X3) AMBER | 15 (5X3) AMBER | 15 (5X3) AMBER | 20 (5X4) RED | |
| <u>SR05</u> | Sustainable Digital Solutions | Interim Head of Adult Social Care (Commissioning) | 20 (5x4) RED | 12 (4X3) AMBER | |
| <u>SR06</u> | 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 | 16 (4x4) RED | 16 (4x4) RED | |
| <u>SR07</u> | 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 | |
| <u>SR08</u> | Widening Health Inequalities | Chief Officer | 20 (4x5) RED | 12 (3X4) AMBER | |
| <u>SR09</u> | Leadership Team Capacity | Chief Officer | 20 (5x4) RED | 16 (4X4) RED | 16 (4X4) RED | 16 (4X4) RED | 12 (4x3) AMBER | |
| <u>SR10</u> | Corporate Support | Head of Finance and Corporate Services | 20 (5x4) RED | 16 (4X4) RED | 16 (4X4) RED | 16 (4X4) RED | 12 (4x3) AMBER | |
| <u>SR11</u> | 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 | 16 (4x4) RED | 16 (4x4) RED | 16 (4x4) RED | |
| <u>SR12</u> | EU Withdrawal | Head of Health | 16 (4x4) RED | 8 (4x2) YELLOW | 8 (4x2) YELLOW | 8 (4x2) YELLOW | 4 (4x1) GREEN | |
| <u>SR13</u> | Inpatient Mental Health Services | Chief Officer | 16 (4x4) RED | 9 (3x3) YELLOW | |
| <u>SR14</u> | Partnership Premises | Chief Officer | 20 (4x5) RED | | | | | | 16 (4x4) RED | |



Perth & Kinross Health and Social Care Partnership

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 m | Insignificant | 1 | 2 | 3 | 4 | 5 | | |
| | | Very Low / Very remote | Low / Remote | Medium / Possible | High / Probable | Very High / Almost Certain | | |
| | | | Probabili | ity | | | | |

Risk Exposure Rating

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

<u>Priority 1</u> 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.

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 | 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 | | | | |

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.