#### **Stephen Brown (Chief Officer)**

Orkney Health and Social Care Partnership

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Agenda Item: 12

# **Integration Joint Board**

Date of Meeting: 30 August 2023.

Subject: Risk Register.

### 1. Purpose

1.1. To present a revised Risk Register for Members' consideration and approval.

#### 2. Recommendations

The Board is invited to note:

2.1. The proposed changes to the Risk Register, summarised in section 4 of this report.

#### It is recommended:

2.2. That the revised Risk Register, attached as Appendix 1 to this report, be approved.

## 3. Background

- 3.1. The Integration Joint Board (IJB) understands that it is important to identify and manage the risks which are inherent in its activities and in the services it commissions from NHS Orkney and Orkney Islands Council.
- 3.2. The Board approved a refreshed Risk Management Strategy at its meeting held on 19 April 2023.
- 3.3. The approved Risk Management Strategy states: 'Risk Management is a continuous and critical process that enables the Integration Joint Board to manage uncertainty (positive or negative) i.e. its exposure to risk'.
- 3.4. It should be acknowledged that risk can never be eliminated in its entirety and some risks can identify positive opportunities which, with the appropriate level of control, may lead to improvements.
- 3.5. On 21 June 2023, when considering the draft revised Risk Register, the Board requested amendments to be made to the document and subsequently brought back for approval.

#### 4. Amendments / Updates

- 4.1. The format of the risk register has been changed to separate 'existing mitigating controls' and 'actions to do to control risk with a timescale for completion', so that the lead person and target action by date are clearly identified. This follows Specific, Measurable, Achievable, Realistic and Timely (SMART) principles.
- 4.2. It is anticipated that continuing progress will be made towards further aligning the Risk Register with the priorities of the Strategic Plan and risks identified of not being able to deliver the priorities. The revised risk register includes risks relating to unpaid carers.
- 4.3. With the exception of risks relating to the withdrawal of Primary Care Improvement Plan (PCIP) funding, which will be reported as a risk within the NHS operational risk process, the risk register has been updated to include revisions requested by members at the Board meeting held on 21 June 2023.
- 4.4. The revised IJB's Risk Management Strategy requires that the Risk Register should be reviewed at least six monthly.
- 4.5. All amendments since June 2023 are 'track changed' in the Appendix for ease.

### 5. Contribution to quality

Please indicate which of the Orkney Community Plan 2023 to 2030 values are supported in this report adding Yes or No to the relevant area(s):

| Resilience: To support and promote our strong communities.   | Yes. |
|--|------|
| <b>Enterprise</b> : To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.                   | No.  |
| <b>Equality</b> : To encourage services to provide equal opportunities for everyone.   | Yes. |
| <b>Fairness</b> : To make sure socio-economic and social factors are balanced.   | Yes. |
| <b>Innovation</b> : To overcome issues more effectively through partnership working.   | No.  |
| <b>Leadership</b> : To involve partners such as community councils, community groups, voluntary groups and individuals in the process. | No.  |
| <b>Sustainability:</b> To make sure economic and environmental factors are balanced.   | No.  |

## 6. Resource and financial implications

6.1. The Risk Register is updated within existing resources. There may however be cost implications arising from the actions required to control risk. Arrangements to meet these costs need to be considered on a case-by-case basis.

#### 7. Risk and equality implications

7.1. The development of this register is part of the process of identifying, managing and mitigating risks to the IJB.

## 8. Direction required

Please indicate if this report requires a direction to be passed to:

| NHS Orkney.             | No. |
|-------------------------|-----|
| Orkney Islands Council. | No. |

## 9. Escalation required

Please indicate if this report requires escalated to:

| NHS Orkney.             | No. |
|-------------------------|-----|
| Orkney Islands Council. | No. |

### 10. Author and contact information

10.1. Peter Thomas (Chief Finance Officer), Integration Joint Board. Email: <a href="mailto:peter.thomas@orkney.gov.uk">peter.thomas@orkney.gov.uk</a>, telephone: 01856873535 extension 2611.

### 11. Supporting documents

11.1. Appendix 1: Risk Register.



# **Risk Register**

# **Orkney Integration Joint Board**

August 2023.

The refreshed Risk Management Strategy was agreed by the Integration Joint Board on 19 April 2023.

The Risk Register for the Integration Joint Board (IJB) is the Strategic Risk Register for the Board. There is also a service Risk Register for Orkney Health and Social Care Partnership which contains more operational risks. These Risk Registers are reviewed regularly through the performance management system.

The risks are set out below, with likelihood and impact informed by the risk matrix.

#### **Risk Matrix**

| Likelihood.         | Severity of Consequences. |             |               |                 |                 |  |  |  |  |  |
|---------------------|---------------------------|-------------|---------------|-----------------|-----------------|--|--|--|--|--|
|                     | Negligible (1).           | Minor (2).  | Moderate (3). | Major (4).      | Extreme (5).    |  |  |  |  |  |
| Almost Certain (5). | Medium (5).               | High (10).  | High (15).    | Very High (20). | Very High (25). |  |  |  |  |  |
| Likely (4).         | Medium (4).               | Medium (8). | High (12).    | High (16).      | Very High (20). |  |  |  |  |  |
| Possible (3).       | Low (3).                  | Medium (6). | Medium (9).   | High (12).      | High (15).      |  |  |  |  |  |
| Unlikely (2).       | Low (2).                  | Medium (4). | Medium (6).   | Medium (8).     | High (10).      |  |  |  |  |  |
| Rare (1).           | Low (1).                  | Low (2).    | Low (3).      | Medium (4).     | Medium (5).     |  |  |  |  |  |

Very High: Senior manager action to confirm the level of risk identified and produce an action plan to eliminate/reduce or transfer the risk.

High: Service manager action to confirm the level of risk identified and produce an action plan to eliminate/reduce or transfer the risk.

Medium: Department action to confirm the level of risk identified and produce an action plan to eliminate/reduce or transfer the risk.

Low: Department action to confirm the level of risk identified and manage using routine procedures.

| Number.      | Risk Title             | ).                            |    |             |            |                           |     | Cluster.              |              |
|--------------|------------------------|-------------------------------|----|-------------|------------|---------------------------|-----|-----------------------|--------------|
| 1.           | IJB Finar              | IJB Financial Sustainability. |    |             |            |                           |     | Financial             |              |
| Risk Rating: | Owner. Chief Finance O |                               |    | ce Officer. |            |                           |     |                       |              |
| Likelihood.  | 4.                     | Impact.                       | 5. | RAG:        | Very High. | Current<br>Risk<br>Score: | 20. | Target Risk<br>Score: | 1 <u>6</u> , |

| Vulnerability.   | Trigger.   | Consequences.   | Existing Mitigation Controls.  | Actions to do to control Risk with a timescale for completion.  |
|--|--|---|--|---|
| There is a risk that if financial and demographic pressures are not effectively  | Demographic changes resulting in increased demand for services.  Increasing need to              | Poor Care Inspectorate assessments.  Not meeting our statutory requirements.              | Financial information reported regularly to the IJB to highlight pressure areas.               | To engage with the Grip and Control programme taking place at NHS Orkney.   |
| planned for and<br>managed over the<br>medium <u>(two to five</u>  | support people with complex needs at home without additional                                     | Inability to meet our customers assessed  | The approved Medium Term Financial Plan  | To engage with the Programme for Change exercise taking place at  |
| years), this could result in budget deficits (i.e. being in excess the IJB's budget allocations) leading to the IJB being required to implement a recovery plan. | resources to meet increased demand.  Legislative requirements unsupported by additional funding. | Reputational damage towards Orkney Health and Social Care Partnership.  Potential need to | (2022-2025).  IJB budget planning processes and scrutiny.  Regular meetings with the Financial | Orkney Islands Council.  As part of our recovery planning, we will utilise a joint development session with IJB, Elected Members and the Board of NHS |
| Potential failure to meet legislation and an impact on the ability of  | Care Inspectorate standards and public expectations of service                                   | reduce service delivery.  | Sustainability Office in place.  | Orkney to notify the IJB's financial projection for the current year, to discuss the  |

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Deleted: Financial information should be reported regularly to the IJB to highlight pressure areas.¶ Medium Term Financial Plan in place.¶ IJB budget planning processes and scrutiny.¶ Some contingency arrangements in place in regard to operational service pressures within partner bodies. Regular meetings with the Financial Sustainability Office in place.¶

The Scottish Government has recognised the pressures regarding specific elements of the service and have allocated additional funding.¶

Eligibility criteria in place.¶

Three-year Strategic Plan which includes transformation of services to ensure sustainability.¶
Performance reporting on a regular basis identifies

Performance reporting on a regular basis identifies targets that are either met or unmet.¶

Additional funding from Scottish Government for Health and Social Care on managing pressures.¶
Progress with the actions from the Joint Working and

IJB Adjustments internal audits. ...

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**Deleted:** Continued need for savings targets poses a risk for operation of all our services. This could have a knock on effect on preventive services or transformational change which will not be cost

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| Vulnerability.                               | Trigger.                                  | Consequences. | <b>Existing Mitigation</b>                      | Actions to do to control                | <br>Deleted: Options.                             |
|--|---|---------------|---|---|---|
|  |   |               | Controls.                                       | Risk with a timescale for completion.   | Deleted: Mitigating Actions.                      |
| IJB to commission                            | delivery within                           |               | A high criteria                                 | financial recovery planning             | Deleted: not                                      |
| services to the most                         | available resources.                      |               | requirement has                                 | process and to consider                 | Deleted: the resources                            |
| vulnerable people in Orkney.                 | Inflationary pressures.                   |               | been set for eligibility for service provision. | the risk appetite to recovery planning. |   |
| There is a risk that the                     | Reducing real terms budget allocation for |               | The Strategic Plan                              | Lead: Chief Officer.                    |   |
| IJB will be unable to                        | the public sector to                      |               | 2022-2025 where it                              | Target action by date: 25               | <br>Deleted: U                                    |
| deliver upon its existing                    | partner bodies.                           |               | relates to                                      | October 2023.                           | <br>Deleted: in full the                          |
| savings targets or any                       |   |               | transformation of                               |   |   |
| new savings imposed by either partner bodies | care needs from                           |               | services to ensure sustainability.              |   | <br>Deleted: Treat.                               |
| (i.e. NHS Orkney or                          | reduced preventative or                   |               |   |   |   |
| Orkney Islands Council)                      |   |               |   |   | <br>Deleted: and achieve new savings to deliver a |
|  | activity.                                 |               |   |   | balanced budge.t.                                 |
|  |   |               |   |   | Deleted: t.                                       |

| Number.      | Risk Title | Risk Title.  |              |               |            |                           | Cluster. |                       |    |  |
|--------------|------------|--------------|--------------|---------------|------------|---------------------------|----------|-----------------------|----|--|
| 2.           | Recruitm   | ent, Develop | ment and R   | etention of V | Vorkforce. |                           |          | Staffing.             |    |  |
| Risk Rating: | Owner.     |              | Chief Office | er.           |            |                           |          |                       |    |  |
| Likelihood.  | 5.         | Impact.      | 4.           | RAG:          | Very High  | Current<br>Risk<br>Score: | 20.      | Target Risk<br>Score: | 9. |  |

| Vulnerability.   | Trigger.   | Consequences.  | Existing Mitigation Controls                             | Actions to do to control Risk with a timescale for completion,                                 |   |  |
|--|--|--|--|--|---|--|
| Insufficient workforce planning actions  | Service staff become overstretched.  | Service cannot manage within its resources.                    | The Health and Social Care Three                         | Annual updating to the<br>Three-Year Workforce   |   |  |
| underway to shape<br>future workforce through<br>redeployment and<br>training etc. | The service does not have the right staff in the right place, at the                   | have the right staff in the right place, at the                |  | Plan in particular further work is required in relation to social care / social work elements. |   |  |
| Capacity issues make it difficult for the service to realise its priorities.       | right time, to deliver<br>Strategic Plan priorities<br>and/ or statutory<br>functions. | stress related absence.  Key pieces of work are not able to be | Quarterly meetings are in place with the Council, Health | Lead: Head of Strategic Planning and Performance.  |   |  |
| Failure to recruit and retain appropriately skilled workforce.  Aging workforce.   | Statutory officers are unable to discharge their statutory functions adequately.       | unable to discharge their statutory functions                  | unable to discharge their statutory functions            | undertaken. Service standards drop and vulnerable people are placed at risk.                   | Board and Third Sector Interface to discuss workforce planning as a whole | Target Action by date: 31 March 2024. An initial training needs analysis report based on |
| Aging Worklorde.   | Widening gap between staff pay in Social Care sector to comparable                     | Service is reactive rather than proactive.                     | system approach. A proactive approach to                 | social work, will be presented to the next IJB   |   |  |

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| Vulnerability. | Trigger.             | Consequences.   | <b>Existing Mitigation</b>  | Actions to do to control   |                                  |
|----------------|----------------------|---|---|--|----------------------------------|
|                |                      |   | Controls.   | Risk with a timescale for  | Deleted: Options.                |
|                |                      |   |   | completion,  | <br>Deleted: Mitigating Actions. |
|                | jobs elsewhere.      | Over reliance on  | recruitment,  | Joint Staff Forum in June.   |                                  |
|                | Retirement of staff. | agency staffing.  | succession planning   | Service specific lists of  |                                  |
|                |                      | Lack of continuity in the relationship between care worker and service user.  Experience and knowledgeable staff leaving the sector.  Regulatory authorities report poor performance and service is unable to | and attraction of people to live and work in Orkney and "Grow our own" initiatives.  Launching of a Sponsorship and Trainee Social Work Partnership with Open University to produce qualified Social Workers over | training needs are to be developed.  Lead: Head of Strategic Planning and Performance.  Target action by date: 31 March 2024.  To develop a robust values-based induction programme with clear |                                  |
|                |                      | respond effectively to inspection regulations.  An increased risk in legal challenges and   | next 2,4, 6 and 10 years. Exit Interviews.  | learning outcomes and links to development opportunities.  Lead: Head of Strategic Planning and  | Deleted: Treat.                  |
|                |                      | complaints.   |   | Performance.  Target action by date: TBC following the findings from the individual service needs review. To establish a training plan based on needs.  Lead: Head of Strategic                | Deleted: Heat.                   |

| Vulnerability. | Trigger. | Consequences. | Existing Mitigation Controls, | Actions to do to control<br>Risk with a timescale for   |
|----------------|----------|---------------|-------------------------------|---|
|                |          |               |                               | Planning and Performance.  Target action by date: TBC. The benefits of training can only be obtained, largely, as and when there is a stable workforce within Orkney Health and Social Care Partnership.  The projected financial cost of training will need to be estimated and a budget identified.  Lead: Head of Strategic Planning and Performance.  Target action by date: TBC, to follow on from the review of detailed training needs analysis and training plan, |

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Deleted: The Health and Social Care Three Year Workforce Plan submitted to Scottish Government on 31 July 2022. Further work required in relation to social care / social work elements. Quarterly meetings in place with Council, Health Board and Third Sector Interface to discuss workforce planning as a whole system approach.¶

Workload tools will be rolled out during June to October 2023 which will be employed to define current need against current position, as well as projecting future required workforce.¶

This anticipates, as far as possible, the areas of

greatest risk in shortfall of employees.¶

More proactive approach to recruitment, succession planning and attraction of people to live and work in Orkney and 'Grow our own initiatives. ¶

Launching of a Sponsorship and Trainee Social Work Partnership with Open University to produce qualified Social Workers over next 2,4, 6 and 10 years.¶

The Learning Needs Analysis will show the gaps that

The Learning Needs Analysis will show the gaps that the service needs to address. Once completed the Action Plan, , will detail what is needed to arm employees with the skills, knowledge and tools to be able to fulfil their roles and feel supported to do so. The first phase covers social care and will focus on learning and training gaps, to help retain staff.

The Internal Audit and progress on the action plan on workforce planning will be presented to Performance and Audit Committee in June 2023.¶

A report on the status of outcomes contained in the Orkney Health and Care Workforce Plan 2020 – 2022 was presented to the Board in April 2023.

| 3.           | Public Pr | otection. |             |               | Strategic.     |                           |          | Strategic.            |            |
|--------------|-----------|-----------|-------------|---------------|----------------|---------------------------|----------|-----------------------|------------|
| Risk Rating: | Owner.    |           | Interim Hea | d of Children | , Families and | d Justice Serv            | ices and | Chief Social Wor      | k Officer. |
| Likelihood.  | 4.        | Impact.   | 5.          | RAG:          | Very High.     | Current<br>Risk<br>Score: | 20.      | Target Risk<br>Score: | 10.        |

| Vulnerability.  | Trigger.  | Consequences.  | Existing Mitigation Controls,  | Actions to do to control Risk with a timescale for completion,  |
|---|---|--|--|---|
| A failure in providing effective public protection could lead to a child or vulnerable adult experiencing or being at risk of significant harm. | Vacancies in suitably qualified and experienced staff.  Potential ineffective processes and joint working arrangements around identifying, investigating, sharing information and protective action  Findings of the Children and Young People in Need of Care and Protection report.  Findings of the Adult Support and Protection Inspection in 2023, | Reputational damage to Orkney Health and Social Care Partnership. Potentially a child or vulnerable adult experiencing or being at risk of significant harm. | Improvement Plan from the joint Children and Young People in Need of Care and Protection inspection.  Recruitment of the Public Protection Lead Officer and the Public Protection Learning and Development Officer. The Adult Support and Protection Improvement Plan has now been signed by the Chief | To redesign the governance arrangements for Children's Services Strategic Partnership.  Lead: Head of Strategic Planning and Performance.  Target action by date: 30 September 2023.  To update child protection procedures in line with national guidance.  Lead: Head of Strategic Planning and Performance.  Target action by date: 31 |

in 2023.

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**Deleted:** Findings of Children's susequent Progress Reviews.¶ Findings of the Adult Support and Protection Inspection

**Deleted:** Ineffective working arrangements to identify, investigate, share information, and take collective, effective, protective action for children and vulnerable adults experiencing or at risk of significant harm.

**Deleted:** Adverse reports from Care Inspectorate Inspection findings.

| Vulnerability. | Trigger. | Consequences. | Existing Mitigation Controls,                                 | Actions to do to control Risk with a timescale for completion, |
|----------------|----------|---------------|---|--|
|                |          |               | Officers Group and the Care Inspectorate and is now in place. | March 2024   |

| Number.      | Risk Titl  | e.              | Cluster.   |              |            |     |                       |            |  |
|--------------|--|-----------------|--|--------------|------------|-----|-----------------------|------------|--|
| 4.           | Analogu  | e to Digital \$ | Financial (as this is a strategic risk due to the financial risk). |              |            |     |                       |            |  |
| Risk Rating: | Owner.   |                 | Head of He   | alth and Cor | nmunity Ca | re. |                       |            |  |
| Likelihood.  | 5. Impact. 3. RAG: High. Current 15. Risk Score: |                 |  |              |            |     | Target Risk<br>Score: | <u>5</u> . |  |

| Vulnerability.   | Trigger.   | Consequences.   | Existing Mitigation Controls   | Actions to do to control<br>Risk with a timescale for  |
|--|--|---|--|--|
|  |  |   | ·  | completion.  |
| Vulnerable adults left without access to Telecare as a means of support, | Switch from analogue to digital planned for 2023 – 2025 in Scotland. | Vulnerable adults could<br>be left without a means<br>to contact someone if<br>they are in need of help | Funding of £71,400 is available from the Scottish Government to test new | The project team continues to test the capabilities of alternative kit in an Orkney environment. |
|  |  | which could result in not getting appropriate treatment in a timely                                     | equipment now<br>available both in<br>terms of efficacy and              | A paper is to be prepared and presented to a future meeting of the Board to                      |

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Deleted: Progress Improvement Plan from the Joint Children Service's inspection.¶
Significant preparation activity prior to announcement of Adult Support and Protection inspection.¶
Chief Officer's Group Action Planning arrangements to address organisational public protection working arrangements and resource considerations.¶
Recruitment of Public Protection Lead Officer and Learning and Development under way.

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| fashion.                                  | connectivity issues. | detail the estimated cost of  |
|---|----------------------|---|
| Significant increase in                   |                      | transition and in future  |
| cost of service provision                 |                      | service provision.  |
| once appropriate kit has been identified. |                      | All service users have  |
| Possible future need to                   |                      | been written to by the Telecare team advising                                       |
| reconsider service user                   |                      | them to be in touch if there  |
| charges in light of                       |                      | is a change to their  |
| increased running                         |                      | existing telephone  |
| costs.                                    |                      | package.  |
|   |                      | Lead: Head of Health and Community Care.  |
|   |                      | Target action by date: 31<br>March 2024.  |
|   |                      | Note: It is anticipated that all project funding will be utilised by 31 March 2024, |

| Number.      | Risk Title | <del>)</del> .           |            | Cluster.   |  |  |  |  |           |
|--------------|------------|--------------------------|------------|--|--|--|--|--|-----------|
| 5.           | Budget S   | dget Setting. Financial. |            |  |  |  |  |  |           |
| Risk Rating: | Owner.     |                          | Chief Fina | Chief Finance Officer.                                 |  |  |  |  |           |
| Likelihood.  | 3.         | Impact.                  | 4.         | 4. RAG: High Current Risk Score: Target Risk Score: 6, |  |  |  |  | <u>6,</u> |

| Vulnerability. | Trigger. | Consequences. | <b>Existing Mitigation</b> | Actions to do to |
|----------------|----------|---------------|----------------------------|------------------|
| •              |          | •             |                            |                  |

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**Deleted:** Funding of £71,400 is available from the Scottish Government to test new equipment now available both in terms of efficacy and connectivity issues.¶

Regular meetings with Scottish Government colleagues ensures sharing of information both flowing from and into Orkney.¶

Ongoing support work with national groups such as Connecting Scotland has been undertaken through services.¶

Progress development and recruitment of Telecare Development Officer.

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|                          |                            |                         | Controls,           | control Risk with a       |
|--------------------------|----------------------------|-------------------------|---------------------|---------------------------|
|                          |                            |                         |                     | timescale for             |
|                          |                            |                         |                     | completion,               |
| Budget allocations from  | Not receiving formal       | Unable to               | The IJB is advised, | Ongoing discussions       |
| partners are not set and | budget offers from         | commission/decommission | annually, of the    | with partner bodies on    |
| approved prior to start  | <u>partner</u> bodies in a | services with financial | delegated budgets   | more joined up working.   |
| of financial year        | timeous manner.            | resources attached.     | provided by each    | Budget allocations        |
| causing the IJB to be    | Not providing partners     |                         | partner,            | should be sent by the     |
| operating without a      | service budgets in a       |                         |                     | IJB to both the Partners  |
| formally agreed budget.  | timeous manner.            |                         |                     | for the services they     |
|                          |                            |                         |                     | deliver. The budget       |
|                          |                            |                         |                     | should detail, service    |
|                          |                            |                         |                     | pressures, saving         |
|                          |                            |                         |                     | initiatives, and change   |
|                          |                            |                         |                     | <u>initiatives.</u>       |
|                          |                            |                         |                     | Lead: Chief Finance       |
|                          |                            |                         |                     | Officer.                  |
|                          |                            |                         |                     | Target Action by date:    |
|                          |                            |                         |                     | To be in place by 1 April |
|                          |                            |                         |                     | 2024.                     |

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Detailed budget to Partners providing commissioned services not being set and approved prior to the commencement of the financial year.

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Progress the actions from the Internal Audit on Joint Working.¶

Joint correspondence to Scottish Government on the budget setting process to ensure ability to have budget setting discussions in a timely fashion.¶

Timeous distribution of detailed budgets to Partners for

commissioned services.

| Number.      | Risk Title | Risk Title.                            |             |                |        |         |             |             | Cluster.   |  |
|--------------|------------|--|-------------|----------------|--------|---------|-------------|-------------|------------|--|
| 6.           | Implicati  | Implications of National Care Service. |             |                |        |         |             | Strategic.  | Strategic. |  |
| Risk Rating: | Owner.     |  | Chief Of    | Chief Officer. |        |         |             |             |            |  |
| Likelihood.  | 4          | Impact.                                | <u>.3</u> . | RAG:           | "High. | Current | <u>1</u> 2, | Target Risk | 6.         |  |
|              |            |  |             | Risk<br>Score: |        |         |             |             |            |  |

| Vulnerability.   | Trigger.  | Consequences.  | Existing Mitigation Controls   | Actions to do to control Risk with a timescale for completion,  |
|--|---|--|--|---|
| The Scottish Government's intention to create a National Care Service and to amend the functions of Integration Joint Boards may affect the provision of care in Orkney. | National developments relating to the redesign of adult care services may not take account of the unique requirements of delivering effective care services in remote and rural areas, and the higher costs of care required for small provision in rural areas may not be recognised and funded appropriately. | Reduced ability to support and protect individuals and families by delivering effective care services within Orkney. | Engagement with the Scottish Government through COSLA, the Chairs' and Vice Chairs' national meetings, and through the Chief Officers' Group to ensure there is a full understanding of Orkney's challenges, | To be reviewed when the scope of the National Care Service, and its method of operation become better known.  Lead: Chief Officer.  Target action by date: Ongoing review. The National Care Service is planned to be in operation by May 2026, |

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**Deleted:** concern that eligibility for services may become more challenging for service users should a national set of criteria be required; and the possibility that the higher costs o

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Deleted: Engage with the Scottish Government through COSLA, the Chairs' and Vice Chairs' national meetings, and through the Chief Officers' Group to ensure there is a full understanding of Orkney's challenges. ¶ Utilise local ministerial visits to ensure the Orkney perspective is heard.

**Deleted:** services and related inter-island travel

| Number.      | Risk Title.  |         |            |      |        |         |             | Cluster.    |            |
|--------------|--|---------|------------|------|--------|---------|-------------|-------------|------------|
| 7.           | Isles Primary Care Model.  |         |            |      |        |         |             |             |            |
| Risk Rating: | ating: Owner. Head of Primary Care and Associate Medical Director (Community). |         |            |      |        |         |             |             |            |
| Likelihood.  | 4.   | Impact. | <u>3</u> . | RAG: | "High. | Current | <u>12</u> . | Target Risk | <u>4</u> . |
|              | Risk Score:  |         |            |      |        |         |             | Score:      |            |

| Vulnerability.  | Trigger.   | Consequences.  | Existing Mitigation Controls.  | Actions to do to control Risk with a timescale for completion,  |
|---|--|--|--|---|
| There is a risk that the IJB will fail to deliver and meet the population needs of the Isles. | Consistently have no medical cover available to provide on-island response within INOC island, despite exhausting all local resource options, bank locums, and agency provision.  Failure to recruit to posts. Increasing staff vacancies.  Model does not fully support Working Time Directive.  Excess pressure and responsibility placed on | Island communities have no current 24/7 provision of care. | Where there are ongoing vacancies and hard to recruit to positions primary care continue to fill the gaps from bank, agency and locum staff. | Option Appraisal regarding sustainable out of hours cover for all islands underway in conjunction with isles clinicians and communities.  Lead: Head of Primary Care Services.  Target action by date: 31 December 2023 Continue to work with Scottish Ambulance Service and the First Responder (Isles) Group to ensure Responders are treated consistently.  Lead: Chief Officer. |

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| neighbouring branch surgeries for remote support which may lead to increased anxiety / stress and associated impact on their performance.  Reduced staff morale. |  | Target action by date: 31 March 2024.  Set up short life working groups with community representatives in North Ronaldsay, Papa Westray and Eday as starting point for reviewing whole system |   |
|--|--|---|---|
| Crisis management taking up Management time.  High level community concern.  |  | model.  Lead: Chief Officer.  Target action by date: 30  November 2023,   | _ |
| Reputational damage.   |  |   |   |

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Continue to work with Scottish Ambulance Service and the First Responder (Isles) Group to ensure Responders are treated consistently.¶

Set up short life working groups with community representatives in North Ronaldsay, Papa Westray an; Eday as starting point for reviewing whole system model.¶

A Health and Social Care Manager to regularly attend each of the isles Community Council to update communities on any Health and Social Care items and answer questions, with a look to rolling out the offer to all Community Councils.

| Number.      |                | Risk Title.   | tisk Title. |  |        | Cluster.       |              |             |            |
|--------------|----------------|---------------|-------------|--|--------|----------------|--------------|-------------|------------|
| 8.           | Unpaid C       | npaid Carers. |             |  |        | Strategic.     |              |             |            |
| Risk Rating: | Owner. Head of |               |             | d of Strategic Planning and Performance. |        |                |              |             |            |
| Likelihood.  | 4.             | Impact.       | <u>4</u> .  | RAG:                                     | "High. | Current        | <u>,16</u> . | Target Risk | <u>9</u> . |
|              |                |               |             |  |        | Risk<br>Score: |              | Score:      |            |

| Vulnerability.   | Trigger.  | Consequences.   | Existing Mitigation Controls,   | Actions to do to control Risk with a timescale for completion.   |
|--|---|---|---|--|
| There is a risk that support for unpaid carers is not effectively planned for and managed.  This could result in a potential failure to meet legislation and impact on the valuable service unpaid carers are providing within the community. Increasing reliance on unpaid carers may become unsustainable. | Non-self-identification of people providing care as being unpaid career themselves.  External pressure on unpaid carers such as financial pressures from the cost-of-living crisis, the tendency and need for people, including unpaid carers to work longer hours and to defer their own retirement plans, along with educational pressures on young carers. | Reduced time unpaid carers can devote to caring. Increased levels of stress placed upon unpaid carers leading to carer burnout. Reduced level of care unpaid carers can provide. Increased need for statutory care services, placing greater demands on services. Reduced educational | Working with Partners, such as Crossroads Care Orkney, Orkney Islands Council in communications to identify as an unpaid carer. Established an unpaid Carers Conference | Investigate opportunities to work with employers (initially NHS Orkney and Orkney Islands Council) to develop carer-friendly employment policies.  Lead: Head of Strategic Planning and Performance.  Target action by date: 31 December 2023.  Maximise innovative respite care / short breaks options and opportunities.  Lead: Head of Strategic Planning and |

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|  | opportunities for | Performance.  |
|--|-------------------|---|
|  | young carers.     | Target action by date: 31 March 2024.               |
|  |                   | Develop specific strategies to identify and support |
|  |                   | young carers.  Lead: Head of Strategic              |
|  |                   | Planning and Performance.                           |
|  |                   | Target action by date: 31 March 2024                |

