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Agenda Item: 10

Integration Joint Board

Date of Meeting: 15 December 2021.

Subject: Risk Register.

1. Summary

1.1. This report presents the refreshed Risk Register for consideration and approval by the Board.

2. Purpose

2.1. The report supports the governance and scrutiny role of the Members and the effective identification and management of risks.

3. Recommendations

The Integration Joint Board is invited to note:

- 3.1. That the approved Risk Register has been reviewed, resulting in a proposal to reduce the number of risks from 20 to 8, as detailed in section 5.1 of this report.
- 3.2. The proposal to include a new risk relating to the Isles Primary Care Model.

It is recommended:

3.3. That the Board considers the proposal revisions to the Risk Register for the IJB, detailed in section 5.1 of this report, and thereafter approves the updated Risk Register (December 2021), attached as Appendix 2 to this report.

4. Background

- 4.1. 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 Orkney Islands Council and NHS Orkney.
- 4.2. The IJB approved a refreshed Risk Management Strategy at the Board meeting on 10 February 2021.

- 4.3. 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.
- 4.4. 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.
- 4.5. The IJB approved the amended Risk Register at the Board meeting of 21 June 2021.

5. Amendments/Updates

5.1. Attached as Appendix 1 is the Risk Register approved on 21 June 2021. Following a review, some of the risks were considered more operational in nature or repetitive and therefore have been amalgamated within other risks. Accordingly, the following table sets out the proposed amendments to the June Risk Register which, if approved, will see a reduction from 20 risks to 8 risks.

| Risk Number. | Risk Title. | Update. |
|-----------------|---|---|
| 1. | Risk of Failure of a key service provider including availability and constraint of provision. | Local service providers are generally in a sustainable position with limited risk relating of failure. |
| 2. | Conflict between professional, organisational and IJB roles. | This risk has been mitigated to the extent it does not currently require to be on the strategic risk register. |
| 3. | Reluctant Support for Change. | This remains an operational risk and will be mitigated through all service development changes. |
| 5. | Financial and demographic pressures of services. | This has been amalgamated within risk title Financial Sustainability and action number 1 of the proposed Risk Register. |
| 7. | Brexit. | Initial impact has now passed, and any future impact will be monitored operationally. |
| 8. | Impacts of new legislation. | Any new legislation that could impact adversely will be specified in future register. |
| 9. | Lack of strategic Direction for commissioning of services. | This risk has been mitigated to the extent it does not currently require to be on the strategic risk register. |
| 10. | Primary Care Improvement Plan. | Risks associated with the delivery of the Primary Care Improvement Plan are currently held operationally. |

| Risk Number. | Risk Title. | Update. |
|-----------------|--|--|
| 12. | Inability to deliver core protection and support services for children and young people. | This is renamed as Public Protection and action number 4 of the proposed Risk Register. |
| 14. | Annual Accounts Preparation. | Audit Scotland recognised much improvement within the accounts for financial year 2020/21. |
| 16. | Misstatement of Payments to Primary Care Contractors. | This was an operational issue and further checks have been put in place. |
| 18. | Integration Scheme Review. | This has been approved by both Parties. |

5.2. A newly identified risk has been added to the Risk Register, namely the Isles Primary Care Model. Further details and mitigation actions of this high classified risk can be found at Number 9 of the revised Risk Register attached as Appendix 2.

6. Contribution to quality

Please indicate which of the Orkney Community Plan 2019 to 2022 visions are supported in this report adding Yes or No to the relevant area(s):

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

7. Resource implications and identified source of funding

7.1. The Risk Register as a process must be carried out within existing resources. There may however be cost implications arising from the actions required to mitigate any high-risk areas identified. Arrangements to meet these costs need to be considered on a case by case basis.

8. Risk and Equality assessment

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

9. Direction Required

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

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

10. Escalation Required

Please indicate if this report requires escalated to:

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

11. Author

11.1. Pat Robinson (Chief Finance Officer), Integration Joint Board.

12. Contact details

12.1. Email: pat.robinson@orkney.gov.uk.

13. Supporting documents

13.1. Appendix 1: Risk Register June 2021.

13.2. Appendix 2: Risk Register December 2021.

Orkney's Integration Joint Board Risk Register

June 2021.

The refreshed Risk Management Strategy was agreed by the Integration Joint Board on 10 February 2021 and the document can be found at the following link:

https://www.orkney.gov.uk/Service-Directory/S/risk-management-ijb.htm

The Risk Register for the Integration Joint Board is the Strategic Risk Register for the Board. There is also a service risk register for Orkney Health and Care 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 Cons | 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 | e. | | Cluster. | | | | | |
|--|------------------------|----------------------|--|--|-------------|---------------------------|--|---|-------|
| 1. | Risk of f provision | ailure of a ke n. | Governance. | | | | | | |
| Risk Rating: | Owner. | | Head of Hea | alth and Com | munity Care | | | | |
| Likelihood. | 3. | Impact. | 5. | RAG: | High | Current Risk Score: | 15. | Target Risk Score: | 10. |
| Vulnerability. | | Trigger. | | Conseque | nces. | Options. | | Mitigating Act | ions. |
| Risk Rating: Owner. Head Likelihood. 3. Impact. 5. | | | plans in the being the p resort. | nt to contingency e event of rovider of last ndividuals and h potential o care | Treat. | | Appraisal of proconducted as procurement procurement procurement procured and are in place for Main providers tender framewor registered and the Care Inspective Work with provouglity or agreemanaged approrequired. Work with Scott Government, Sand COSLA on market. | contract action plans improvement. are on the ork and monitored by ctorate. iders at risk to ement to care e phased and oach if | |

| Number. | Risk Title. | | | | | | | Cluster. | | | |
|---|-------------|-------------------------------------|---|----------------|------------|---------------------------|--|--|------|--|--|
| 2. | Conflict be | etween profes | ssional, orga | nisational and | IJB roles. | | | Governance. | | | |
| Risk Rating: | Owner. | Owner. | | r. | | | | , | | | |
| Likelihood. | 4. | Impact. | 4. | RAG: | High. | Current Risk Score: | 16. | Target Risk 12. Score: | | | |
| Vulnerability. | 1 | Trigger. | • | Consequence | ces. | Options. | - 1 | Mitigating Action | ons. | | |
| 2. Conflict between profes Risk Rating: Owner. Likelihood. 4. Impact. | | organisations e services peen | Consequences. Services commissioned by IJB are not | | | | Commissioning Implementation approved by ear partners. Committees and groups/forums eand working effects and working effects and working reacross the partners. One-off meeting organisations he when required. Formal arranger place such as In Scheme, Scheme Administration and Delegations St | Implementation Plan is approved by each of the partners. Committees and supporting groups/forums established and working effectively. Good working relationships across the partnership. One-off meetings between organisations held as and when required. Formal arrangements in place such as Integration Scheme, Scheme of Administration and Delegations Standing Orders and Financial | | | |

| Number. | Risk Title. | | | | | | | Cluster. | | |
|---|-------------|--|---|-----------|---|--|--|----------------|-------|--|
| 3. | Reluctant | Support for C | Change. | | | | | Governance. | | |
| Risk Rating: | Owner. | | Chief Officer | ·. | | | | - | | |
| Likelihood. | 3. | Impact. | 3. | RAG: | RAG: Medium. Current 9. Target Risk Score: Score: | | | | 6. | |
| Vulnerability. | | Trigger. | | Consequen | ces. | Options. | | Mitigating Act | ions. | |
| Risk Rating: Owner. Chief Officer. Likelihood. 3. Impact. 3. | | Failure to red services to s equitable, su affordable se Issues are ad piecemeal w strategic ove Diminished r from failure t | ecure stainable and ervices. ddressed ith no rview. eputation | Treat. | | formats in account the Communication Engagement strength ensure all stake involved in any change for deliviservices. Effective continuous communication colleagues and stakeholders. Proposals will be by the IJB. There will be provided in any change for deliviservices. | Effective continuous communication with colleagues and other affected stakeholders. Proposals will be approved by the IJB. There will be project boards with members from across all sectors to drive forward. Assurance sought from the Orkney Opinions Group that | | | |

| | | | | | | | development and delivery was appropriate. | | | |
|--|---|---|--|---|---|---------------------------|---|--|--|--|
| Number. | Risk Title. | I. | | <u> </u> | | <u>I</u> | | Cluster. | | |
| 4. | IJB Financ | cial Sustaina | bility. | | | | | Financial | | |
| Risk Rating: | Owner. | | Chief Financ | e Officer. | | | | | | |
| Likelihood. | 5. | Impact. | 5. | RAG: | Very High. | Current Risk Score: | 25. | Target Risk Score: | 16. | |
| Vulnerability. | | Trigger. | | Consequen | ces. | Options. | | Mitigating Act | ions. | |
| Services comm will not be able of the statutory for those with a need. Unable to delive existing savings achieve new sa deliver a balance | to meet all services ssessed er in full the s and vings to | without add resources to increased d Legislative | increased services. ability to aple with eds at home itional to meet emand. requirements d by additional s of service within the | requirements Inability to m customer's a needs. Finar reputational the service. Continued no savings targe risk for opera | eet our assessed acial and damage to eed for ets poses a ation of all our s could have affect on ervices or onal change | Treat. | | Financial inform reported regular Integration Join Finance and Personal Formation and Health and Carwhich highlights areas. Review and review medium term financesses and Some contingerar arrangements in regard to operators pressures within bodies. | rly to the at Board, NHS erformance of Orkney to Committee as pressure wise the mancial plan. Inning scrutiny. Incy the mancial plan incy the mancial place in a pl | |

| Number. | Risk Title. | | | Cluster. | | | | | |
|---|-------------|-------------------------------------|--|---|------------|---------------------------|---|--|------|
| 5. | Financial | and demogra | phic pressure | es of services | S. | Financial. | | | |
| Risk Rating: | Owner. | | Chief Financ | e Officer. | | | | | |
| Likelihood. | 5. | Impact. | 4. | RAG: | Very High. | Current Risk Score: | 20. | Target Risk Score: | 16. |
| Vulnerability. | • | Trigger. | • | Consequen | ces. | Options. | • | Mitigating Acti | ons. |
| 5. Financial and demographic pressure. Chief Financial Likelihood. 5. Impact. 4. | | cognise c and other r realise | a suitable ler in: Inability to best value Legislation | or pressures to vel can result to provide ue services. on breaches, vice user and | Treat | | Three-year Stra which includes transformation of ensure sustaina Development of Commissioning Implementation Introduction of C Led Support to collaboratively of communities. Performance re regular basis ide targets that are unmet. Additional fundi Scottish Govern | Mitigating Actions. Eligibility criteria in place. Three-year Strategic Plan which includes transformation of services to ensure sustainability. Development of the Strategic Commissioning Implementation Plan. Introduction of Community Led Support to work collaboratively with communities. Performance reporting on a regular basis identifies targets that are either met or | |

| | | | | | | | | National Chief F Officer meeting discussion forur issues impacting partnerships, in | A local network and the National Chief Finance Officer meeting provide a discussion forum for wider issues impacting on partnerships, including prescribing and hosted services. | | |
|--|---|---|---|--|--|---------------------------|-----|--|--|--|--|
| Number. | Risk Title. | • | | • | | | | Cluster. | | | |
| 6. | Recruitme | ent and Retent | ion of Workf | orce. | | | | Staffing. | | | |
| Risk Rating: | Owner. | | Chief Officer | | | | | | | | |
| Likelihood. | 5. | Impact. | 5. | RAG: | Very High | Current Risk Score: | 25. | Target Risk Score: | 9. | | |
| Vulnerability. | | Trigger. | | Consequenc | es. | Options. | | Mitigating Acti | ons. | | |
| Insufficient work planning actions to shape future through redeplot training etc. Capacity issues difficult for the strealise its priorist Failure to recruiretain appropriations workforce. | s underway workforce byment and s make it service to ties. | Service staff overstretched The service of have the right right place, a time, to delive Plan priorities statutory fund Statutory office unable to dis- statutory fund adequately. | d. does not t staff in the t the right er Strategic s and/ or ctions. cers are charge their | Service cann within its resord Existing work becomes over the service standard vulnerability placed at risk Service is reaction proactive. Regulatory arreport poor pland service is | force erstretched. If work are endertaken. Idards drop le people are active rather e. Interes erformance | Treat. | | Service Workformow approved working complements the NHS Orkney Welliams. This anticipates possible, the arguments risk in semployees. Consideration of approach to reduce and retraining a Careful consideration of staff. | which he OIC and orkforce , as far as heas of shortfall of f enhanced heployment s appropriate. ration to the | | |

| | | in: Ar ch cc Ri | | | respond effectively to inspection regulations. An increased risk in legal challenges and complaints. Risk of financial penalties. | | | means to ensure required skills are retained. More proactive approach to recruitment, succession planning and attraction of people to live and work in Orkney and 'Grow our own initiatives. | |
|--|---|-----------------------------|---------------|---|---|---------------------------|--------------|---|----|
| Number. | Risk Title. | | | | | | | Cluster. | |
| 7. Brexit. | | | | | | | Legislative. | | |
| Risk Rating: | Owner. | | Chief Officer | | | | _ | | |
| Likelihood. | 2. | Impact. | 3. | RAG: | Medium | Current Risk Score: | 6. | Target Risk Score: | 3. |
| Vulnerability. | | Trigger. | | Consequences. | | Options. | | Mitigating Actions. | |
| could affect the of services and reduction of wo Financial Impacto Brexit and ot economic issue Financial risks staffing, purchadrugs, equipme | There is a risk that this could affect the continuity of services and a eduction of workforce. Financial Impacts relating or Brexit and other wider economic issues. Changes governm affecting markets. Shortfalls demand | | • | Poorer long term health within the community. Inability to provide high levels of care through services. Inability to reach year end with balanced financial books. Inability to meet financial targets due to potential increased costs. | | Options. Treat. | | See EU-Exit risk registers for NHS Orkney and OIC. An incident management team has been set up within both organisations to address issues as they arise. National resilience systems in place. | |

| Number. | Risk Title. | | | | | | | Cluster. | |
|--|-------------|--|-----------------|--|-----------|---------------------------|----------|---|-------|
| 8. | Impacts o | f new legislat | ion. | | | | | Legislative. | |
| Risk Rating: | Owner. | | Chief Office | ·. | | | | | |
| Likelihood. | 4. | Impact. | 3. | RAG: | High. | Current Risk Score: | 12. | Target Risk Score: | 8 |
| Vulnerability. | 1 | Trigger. | - | Consequence | ces. | Options. | . | Mitigating Act | ions. |
| New legislation and duties could have significant by Scoadditional demands on with u | | Issuing of ne by Scottish (with uninten- consequence | ded local | Consequences. Potential Government action and increased scrutiny due to inability to meet legislative demands. Financial implications such as government penalties, increased legal claims. Poor inspection and audit results. Resources whether human or financial could be considerably pressured. | | Options. Treat | | Mitigating Actions. Three-year Strategic Commissioning Plan which includes transformation of services to ensure sustainability Eligibility Criteria. Introduction of Community Led Support to work collaboratively with communities. | |
| Number. | Risk Title. | | | | | | | Cluster. | |
| 9. | Lack of st | rategic Direc | tion for comn | nissioning of s | services. | | | Legislative | |
| Risk Rating: | Owner. | | Chief Office | ·. | | | | | |
| Likelihood. | 4. Impact. | | 3. RAG : | | High. | Current Risk Score: | 12. | Target Risk Score: | 9. |

| Vulnerability. | Trigger. | Consequences. | Options. | Mitigating Actions. |
|--|--|---|----------|--|
| The Directions for the commissioning of services are not sufficiently detailed for partners to deliver the services. | Lack of directional detail and/or instruction within commissions of services plan. | Services will receive funding without clear expectations and directions to what is expected to be achieved with funds. Partners may not deliver on services objectives or seek best value approach to services delivery. This may lead to lack of service initiation when considering the most effective quality improvement to services. | Treat | A Directions template has been development for approval which includes information on outcomes required and associated budget. There will be revised Directions once Strategic Commissioning Plan is developed and agreed When the full review of the Integration Scheme is completed, new directions will be issued to all services delegated. An annual directions report presented to the Board. |

| Number. | Risk Title |). | Cluster. | Cluster. | | | | | | |
|-------------------------|------------|---|------------|------------------------------|------|---------------------------|-----|-----------------------|-----|--|
| 10. | Primary (| imary Care Improvement Plan. Legislative. | | | | | | | | |
| Risk Rating: | Owner. | | Head of Pr | ad of Primary Care Services. | | | | | | |
| Likelihood. | 4. | Impact. | 4. | RAG: | High | Current Risk Score: | 16. | Target Risk Score: | 12. | |
| Vulnerability. Trigger. | | - 1 | Conseque | Consequences. | | Options. | | Mitigating Actions. | | |

| The Primary Care Improvement Plan | Key nationally identified priorities for primary care | Patient care and public health affected. | Treat. | The plan is submitted to the Board for approval. |
|---|--|---|--------|---|
| proposals will not meet all of the outcomes that are within the GMS contract within the timeframe | improvement are not in place. GP practices do not have the resources they need locally to deliver local | Recruitment and retention challenges in relation to GPs and other primary care colleagues | | Further reports are given to IJB on progress and issues. There is a dedicated Programme Manager to |
| | priorities. | | | manage these priorities. |

| Number. | Risk Title. | | | | | | | Cluster. | | |
|--|---|---------|--|---|--|------------------------------|--------------|---|------|--|
| 11. | COVID-19 | • | | | | | | Legislative. | | |
| Risk Rating: | Owner. | | Head of Hea | Ith and Comm | unity Care, He | ead of Primar | y Care and (| Chief Finance Offi | cer. | |
| Likelihood. | 4. | Impact. | 5. | RAG: | Very High. | Current 20 Risk Score: | | Target Risk Score: | 10. | |
| Vulnerability. | Inerability. Trigger. | | • | Consequences. | | Options. | | Mitigating Actions. | | |
| users/patients a may be affected effects of the Control particularly resistance our care homes. Implications of means that work strategic priority been postpone. | Vulnerability. Vulnerable service users/patients and staff may be affected by the effects of the Coronavirus, particularly residents in our care homes. Implications of COVID-19 means that work on the strategic priorities has been postponed. Financial risks relating to COVID 19 There is a Sustained transn the virus in Orknot communities, affet those most at ris Outbreak in one care homes. Staff tiredness. Lack of available provide the progrection of the communities and those most at ris Outbreak in one care homes. Conflicting demant the department. | | Orkney es, affecting at risk. n one of our s. ess. allable staff to programme demands on | The consequence to the tragic for affected. Failure to de vaccination putthin Gover timescales. Increased state and the strategic aim | liver the brogramme nment aff absence liver on key | Treat | | Well communicated instruction for health and social care staff appropriate to professional role by Public Health. All national and local measures including social distancing, frequent handwashing, appropriate PPE, staff and service user/resident screening, self-isolation. | | |

| T | 1 |
|-------------------------------|---------------------------------------|
| implication to the IJB if the | Additional staffing been |
| costs of the response to | recruited in regard to |
| the crisis are not fully | vaccination programme. |
| funded. There may be | |
| longer term implications | Vaccination programmes |
| that may have financial | starting with those most at |
| impact. | risk. |
| The need to provide the | |
| largest scale vaccination | Close partnership working |
| programme with tight | with local resilience |
| timescales and the need | partnership and Community |
| | Planning partners. |
| to for the programme to | · · · · · · · · · · · · · · · · · · · |
| potentially be delivered | Conformance with all |
| over the next 9 months | performance monitoring by |
| has the potential to | Scottish Government and |
| overwhelm staff. | Care Inspectorate. |
| | Odie mopeotorate. |
| | Detailed financial planning |
| | and monitoring on COVID-19 |
| | is in place and costs are |
| | |
| | considered by the Scottish |
| | Government as part of the |
| | Orkney Mobilisation Plan |
| | response. |
| | Diele en en entire te med en ent |
| | Risk assessment integral part |
| | of the assessment process. |
| | Delling management of All |
| | Rolling programme of All |
| | frontline managers provided |
| | with refresher training |
| | concerning statutory |
| | compliance. |
| | |

| | PVG (Protecting Vulnerable Groups) scheme in place. |
|--|---|
|--|---|

| Number. | Risk Title |). | | | | | | Cluster. | | |
|--|---|--------------|--------------------------------------|---|--|--------------|----------|--|---|--|
| 12. | Inability t | o deliver co | Legislative. | | | | | | | |
| Risk Rating: | Owner. | Owner. | | ldren's Servic | es and Chief So | ocial Work O | fficer. | | | |
| Likelihood. 3. Impact. 5. RAG: | | High. | Current Risk Score: | 15. | Target Risk Score: | 10. | | | | |
| Vulnerability. | Inerability. | | Trigger. | | Consequences. | | . | Mitigating Act | ions. | |
| people are vulito the Council's improve policies procedures and as part of multichild protection support services highlighted in tof a joint inspeservices for chyoung people i care and prote | Children and young Children and people are vulnerable due people in nee | | need of and/or support e their needs | people are r with the bes early life; ch young peop supported ir opportunity When perfo shortfalls are in inspection requires imp However, a consequence | exposed to en and young not provided at chances in ildren and le are not a closing the gap. rmance e highlighted a reports, this provement. collateral ce can be that hore difficult to anent good to work in dren's and | Treat. | | Comprehensive improvement per developed which all areas for improgress with the closely monitor Chief Officers' relevant partner bodies. Progress Revier in April 2021 we external scruting to date and held level of vulnerations. | lan has been ch addresses provement. his plan is red by the Group and the r governance we Inspection ill provide by of progress p determine | |

| | work and social care services, exacerbating vulnerabilities. | |
|--|--|--|
| | | |

| Number. | Risk Title | | | | | | | Cluster. | | |
|---|---|---------------------------------|----------------|--|--|---------------------------|---------------------|--|--|--|
| 13. | Analogue | to Digital Sv | witchover. | | | | | Financial (as this is a strategic risk due to the financial risk). | | |
| Risk Rating: | Owner. | | Head of Head | alth and Comn | nunity Care. | | | | | |
| Likelihood. | 5. | Impact. | 4. | RAG: | Very High. | Current Risk Score: | 20. | Target Risk Score: | 10. | |
| Vulnerability. | | Trigger. Consequences. Options. | | | | • | Mitigating Actions. | | | |
| without access as a means of to cost implicat accelerated sw | ulnerable adults left ithout access to Telecare is a means of support due cost implications of an eccelerated switch from analogue to digital phone | | ned for 2023 – | contact som are in need could result | ut a means to eone if they of help which in not getting treatment in a | Treat. | | There is fundin implementation from Scottish Congoing supportational groups connecting Scottish Services. Programme both a functional celectrology is in suitable timefra | of for £71,400 Sovernment olementation. ort work with a such as otland has en through ard to ensure oling digital on the modern th | |

| Number. | Risk Title. | • | | | | | | Cluster. | | | |
|--|-------------|--|-------------|---|--------------|----------------------------------|--|--|--|--|--|
| 14. | Annual Ad | ccounts Pre | paration. | | | | | Financial | | | |
| Risk Rating: | Owner. | | Head of Hea | alth and Con | nmunity Care | | | · | | | |
| Likelihood. | 3. | Impact. | 4. | RAG: | High | Current 12 Target Risk Score: 8. | | | | | |
| Vulnerability. Trigger. | | Trigger. | | Consequences. | | Options. | | Mitigating Actions. | | | |
| The disclosures in the Annual Accounts do not give the quality assurance required. | | Performand not reporte transparent | | qualified re illustrates organisation | | Treat. | | There will be furwith key officer quality assurant in place and the of sufficient quality and the audit to prowith planned tire. | s to ensure a ace process is accounts are ality to allow gress in line | | |

| Number. | Risk Title | Risk Title. Cluster. | | | | | | | | | |
|--|---|-------------------------------|--------------------------|---|----------|----------|---|----------------|-------|--|--|
| 15. | Set Asid | e Budget. | | Financial . | | | | | | | |
| Risk Rating: | Owner. | Owner. Chief Finance Officer. | | | | | | | | | |
| Likelihood. | 4. | Impact. | 4. | RAG: High. Current Risk Score: 16. Target Risk Score: 12. | | | | | | | |
| Vulnerability. | | Trigger. | | Conseque | ences. | Options. | <u> </u> | Mitigating Act | ions. | | |
| Although the S Budget has be delegated the | dget has been sufficient to be able to re | | Not meetir requiremen | ng our statutory nts. | <u> </u> | | Development s Members on un of set aside bu | nderstanding | | | |

| arrangement is not | oversight in line with the | Potentially not able to fulfil | Development with Finance |
|----------------------|----------------------------|--------------------------------|-----------------------------|
| working as intended. | legislation. | preventive services or | team on information that is |
| | | transformational change | required moving forward. |
| | | which will not be cost | - |
| | | effective. | |
| | | | |

| Number. | Risk Title | Cluster. | | | | | | | | | | |
|---|-------------------------|---|---|--|--|----------|---|---|------------|--|--|--|
| 16. | Misstater | statement of Payments to Primary Care Contractors Financial | | | | | | | | | | |
| Risk Rating: | Owner. | Head of Primary Care. | | | | | | | | | | |
| Likelihood. | 4. | Impact. | 4. | RAG: High Current Risk Score: Target Risk Score: | | | | | | | | |
| Vulnerability. | Vulnerability. Trigger. | | | Consequences. | | Options. | • | Mitigating Actions. | | | | |
| Lack of controls in regard to payments to Primary Care Contractors are not scrutinised sufficiently before payments are made. | | reflected ar | ified audit 2019/20 which a absence of confirm the f a range of | Payments are made which are not appropriate | | Treat. | | Payments are managers and variances are i | unexpected | | | |

| Number. | Risk Title. | 1 | | | | | | Cluster. | | | |
|--------------|-------------|------------------------------|----|------|-----------|---------------------------|-----|-----------------------|-----|--|--|
| 17. | Budget Se | dget Setting. Financial. | | | | | | | | | |
| Risk Rating: | Owner. | wner. Chief Finance Officer. | | | | | | | | | |
| Likelihood. | 5. | Impact. | 5. | RAG: | Very High | Current Risk Score: | 25. | Target Risk Score: | 15. | | |

| Vulnerability. | Trigger. | Consequences. | Options. | Mitigating Actions. |
|---|--|---|----------|--|
| Budgets are not set and approved prior to start of financial year and IJB will be operating without a formally agreed budget. | Not receiving formal budget offers from Partner bodies in a timeous manner. | Unable to commission/decommission services with financial resources attached. | Treat. | Ongoing discussions with partner bodies on more joined up working. Updated integration scheme to agree on how future budgets will be allocated. |

| Number. | Risk Title. | 1 | Cluster. | | | | | | |
|----------------|---|------------|---------------|---|------------|--------|--|--|--|
| 18. | Integratio | n Scheme R | eview. | | Governance | | | | |
| Risk Rating: | Owner. | | Chief Officer | | | | | | |
| Likelihood. | 3. | Impact. | 5. | 5. RAG: High. Current Risk Score: | | | | | 10. |
| Vulnerability. | | Trigger. | • | Consequences. | | | | Mitigating Actions. | |
| | Integration Scheme is not agreed within appropriate | | | There is no of document be partners and | etween the | Treat. | | A review is under between the part this will be submiscottish Govern financial year 20 approval. This will then be the IJB for noting | etners and nitted to ment within 021/22 for a presented to |

| Number. | Risk Title | | | | | | Cluster. | | | |
|---|---|---|---|---|------------|---------------------------|---|---|-------|--|
| 19. | Changes | in Leadership | | | | | | Strategic. | | |
| Risk Rating: | Owner. | | Chief Officer | Chief Officer. | | | | · | | |
| Likelihood. | 5. | Impact. | 5. | RAG: | Very High. | Current Risk Score: | 25. | Target Risk Score: | 15. | |
| Vulnerability. | | Trigger. | | Consequence | ces. | Options. | Mitigating Act | | ions. | |
| Officer in post t | Officer in post to take in leadership role within organisation. | | Failure to redesign integrated services to secure equitable, sustainable and affordable services. Issues are addressed piecemeal with no strategic overview. Diminished reputation from failure to deliver. | | Treat. | | A recruitment campaign has been held and interviews will be taking place in April 2021 to recruit permanent Chief Officer post. Update – New Chief Officer took up permanent appointment on 24 May 2021. | | | |
| Number. | Risk Title | | | | | | | Cluster. | | |
| 20. | Implication | ns of Nationa | I Review of A | dult Social Ca | are. | Strategic. | | | | |
| Risk Rating: | Owner. | | Chief Officer | | | | | · | | |
| Likelihood. | 3. | Impact. | 3. | RAG: | Medium. | Current Risk Score: | 9. | Target Risk Score: | 6. | |
| Vulnerability. Trigger. | | | Consequence | ces. | Options. | • | Mitigating Actions. | | | |
| The Scottish Government's intention to create a National Care Service and to amend the functions of Integration | | National dev relating to the adult care se not take acco unique requi | e redesign of ervices may ount of the | Reduced ability to support and protect individuals and families by delivering | | Treat. | | Engage with the Scottish Government through COSLA the Chairs' and Vice Chairs' national meetings, and through the Chief Officers' | | |

| Joint Boards may affect the provision of care in Orkney. | delivering effective care services in remote and rural areas; the 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 of care required for small services and related interisland travel may not be recognised and funded appropriately. | effective care services within Orkney. | | Group to ensure there is a full understanding of Orkney's challenges. |
|--|---|--|--|---|
|--|---|--|--|---|

Orkney's Integration Joint Board Risk Register

December 2021.

The refreshed Risk Management Strategy was agreed by the Integration Joint Board on 10 February 2021 and the document can be found at the following link:

https://www.orkney.gov.uk/Service-Directory/S/risk-management-ijb.htm

The Risk Register for the Integration Joint Board is the Strategic Risk Register for the Board. There is also a service risk register for Orkney Health and Care 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 Cons | Severity of Consequences. | | | | | | | | |
|---------------------|------------------|----------------------------|-------------|-----------------|-----------------|--|--|--|--|--|
| | Negligible (1). | Negligible (1). Minor (2). | | 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 Financ | Financial Sustainability. | | | | | | | Financial | | |
| Risk Rating: | Owner. | | Chief Financ | e Officer. | | | | 1 | | | |
| Likelihood. | 4. | Impact. | 5. | Risk | | Current Risk Score: | 20. | Target Risk Score: | 12. | | |
| Vulnerability. | | | Consequen | ces. | Options. | | Mitigating Action | ons. | | | |
| There is a risk to financial and depressures are reffectively plant managed over to longer term, result in a poter to meet legislat impact on the atto commission of the most vulner people in Orknown Unable to delive existing savings achieve new satisfied a balance. | emographic not need for and the medium this could ntial failure ion and an bility of IJB services to able by. er in full the sand vings to | Demographic resulting in ir demand for some lineral peoperations and support peoperations and the sources to increased described by the sources of the sources are sources are sources are sources are sources are sources are sources. | ncreased services. bility to ble with ds at home ional meet emand. equirements by additional | Not meeting requirements Inability to more customer's an eeds. Finar reputational the service. Continued not savings target risk for operatives. This a knock on expreventive settransformation which will not effective. | eet our ssessed ncial and damage to eed for ets poses a ation of all our s could have ffect on ervices or onal change | Treat. | | Financial informate reported regular Integration Joint highlights pressured and review and review medium term find IJB budget plant processes and selection of the Scottish Goldhas recognised regarding specific of the service and allocated additional Eligibility criterian which includes | ly to the Board which ure areas. se the ancial plan. ning crutiny. cy place in ional service partner vernment the pressures ic elements and have anal funding. in place. | | |

| | | transformation of services to ensure sustainability. |
|--|--|--|
| | | 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. |

| Number. | Risk Title. | | | | | | Cluster. | | | |
|---|---|---|--|--------------|--|---------------------------|----------|--|--|--|
| 2. | Recruitme | ent and Reten | tion of Workf | orce. | | | | Staffing. | Staffing. | |
| Risk Rating: | Owner. | | Chief Officer | | | | | | | |
| Likelihood. | ikelihood. 5. Impact. 5. RAG: Very High | | | | | Current Risk Score: | 25. | Target Risk Score: | 9. | |
| Vulnerability. | Vulnerability. Trigger. | | | Consequen | ces. | Options. | <u> </u> | Mitigating Actions. | | |
| Insufficient workforce planning actions underway to shape future workforce through redeployment and training etc. Capacity issues make it difficult for the service to realise its priorities. Failure to recruit and retain appropriately skilled workforce. | | Service staff overstretched The service of have the right right place, a time, to delive Plan priorities statutory fund Statutory office unable to dis | d. does not at staff in the at the right er Strategic s and/ or ctions. cers are | Service stan | ources. kforce erstretched. of work are e undertaken. dards drop ble people are | Treat. | | Service Workfornow approved to complements the NHS Orkney Workney Work | which ne OIC and orkforce s, as far as reas of | |

| statutory functions adequately. | Service is reactive rather than proactive. | Consideration of enhanced approach to redeployment |
|---------------------------------|--|--|
| | Regulatory authorities report poor performance and service is unable to respond effectively to inspection regulations. | and retraining as appropriate. Careful consideration to the release of staff by voluntary means to ensure required skills are retained. |
| | An increased risk in legal challenges and complaints. Risk of financial penalties. | More proactive approach to recruitment, succession planning and attraction of people to live and work in Orkney and 'Grow our own initiatives. |

| Number. | Risk Title. | • | | | Cluster. | | | | | |
|---|--|--|------------------------|---|-----------------|---------------------------|---------------------|---|---|--|
| 3. | COVID-19 | | | | | | | Legislative. | Legislative. | |
| Risk Rating: | Owner. | | Head of Hea | alth and Comm | nunity Care, He | ead of Primar | y Care and | Chief Finance Off | icer. | |
| Likelihood. | . 4. Impact. | | 5. | RAG: | Very High. | Current Risk Score: | 20 | Target Risk Score: | 10. | |
| Vulnerability. Trigger. | | | Consequences. | | Options. | | Mitigating Actions. | | | |
| Vulnerable serving users/patients a may be affected effects of the C particularly resion our care homes | and staff d by the oronavirus, dents in | the virus in C communities those most a Outbreak in C | , affecting t risk. | be tragic for those affected. Failure to deliver the vaccination programme | | Treat | Treat | | Well communicated instruction for health and social care staff appropriate to professional role by Public Health. | |
| Implications of means that wor | COVID-19 | care homes. Staff tirednes | SS. | within Gover timescales. | rnment | | | All national and measures includistancing, free | iding social | |

strategic priorities has Lack of available staff to Increased staff absence handwashing, appropriate been postponed. provide the programme PPE, staff and service Failure to deliver on key user/resident screening, self-Financial risks relating to Conflicting demands on strategic aims. isolation. COVID 19 There is a the department. significant financial Additional staffing been implication to the IJB if the recruited in regard to costs of the response to vaccination programme. the crisis are not fully Vaccination programmes funded. There may be starting with those most at longer term implications risk. that may have financial Close partnership working impact. with local resilience The need to provide the partnership and Community largest scale vaccination Planning partners. programme with tight Conformance with all timescales and the need performance monitoring by to for the programme to potentially be delivered Scottish Government and Care Inspectorate. over the next 9 months has the potential to Detailed financial planning overwhelm staff. and monitoring on COVID-19 is in place and costs are considered by the Scottish Government as part of the Orkney Mobilisation Plan response. Risk assessment integral part of the assessment process. Rolling programme of All frontline managers provided with refresher training

| | | concerning statutory compliance. |
|--|--|---|
| | | PVG (Protecting Vulnerable Groups) scheme in place. |

| 4. | Public Pr | ic Protection. | | | | | | | |
|--|---|----------------|---|---|------------|---------------------------|---|---|-------|
| Risk Rating: | Owner. | | Chief Office | er. | | | | | |
| Likelihood. | 4. | Impact. | 5. | RAG: | Very High. | Current Risk Score: | 20. | Target Risk Score: | 10. |
| Vulnerability. | • | Trigger. | | Consequences. | | Options. | • | Mitigating Act | ions. |
| Adult's Service Inspection and Reports 2021. Potential of Adu | of Children's and ervices n and Review 2021. of Adults n and Review in nonths. Identified level of public protection activity greater than family group comparators. Ineffective arranger investigatinformat collective protective protective children adults expenses and protection activity greater than family group informat collective protective protective protective children adults expenses and protection activity greater than family group investigations. | | investigate, information, collective, e protective a children and | nts to identify, share , and take offective, oction for d vulnerable riencing or at | Treat. | | Improvement F Children's and Services in pla Services Progr Care Inspector 2021, indicates heading in the COG Action Pl arrangements organisational protection work arrangements considerations | Adult's ce. Children's ress review by rate, August s we are right direction. anning to address public king and resource | |

| Number. | Risk Title | • | | | | | | Cluster. | |
|---|--|---------|--|---|----------|-------------------------------|---------------------|---|--|
| 5. | Analogue to Digital Switchover. | | | | | | | Financial (as this is a strategic risk due to the financial risk). | |
| Risk Rating: | Owner. | | Head of Hea | alth and Community | Care. | | | | |
| Likelihood. | 5. | Impact. | 4. | RAG: Ver | y High. | Current 20. Risk Score: | | Target Risk Score: | 10. |
| Vulnerability. | nerability. Trigger. | | Consequences. | | Options. | | Mitigating Actions. | | |
| Vulnerable adul without access as a means of s to cost implicati accelerated swi analogue to dig lines. | to Telecare support due ons of an tch from | | analogue to ed for 2023 – tland. | Vulnerable adults could be left without a means to contact someone if they are in need of help which could result in not getting appropriate treatment in a timely fashion. | | Treat. | | There is funding implementation from Scottish Go TEC to test implementation on a functional groups connecting Scottoen undertakes services. Programme boat a functional cental capable of hand technology is impossible timefrar | for £71,400 overnment ementation. t work with such as land has n through and to ensure tral system ling digital plemented in |

| Number. | Risk Title | | | | Cluster. | | | | |
|--|--|-------------------|---|-------------|----------|--|--|--|-----|
| 6. | Set Aside | Set Aside Budget. | | | | | | Financial . | |
| Risk Rating: | Owner. | | Chief Finan | ce Officer. | | | | <u>, </u> | |
| Likelihood. | 4. | Impact. | 4. | RAG: | High. | Current Risk Score: | 16. | Target Risk Score: | 12. |
| Vulnerability. Trigger. | | | Consequences. | | Options. | | Mitigating Actions. | | |
| Although the Se Budget has bee delegated the arrangement is working as inter | gh the Set Aside t has been steed the ement is not ement is not at the sufficient to be able to have the strategic oversight in line with the strategic oversig | | s. ot able to fulfil ervices or onal change | Treat. | | Development s Members on us of set aside bus Development v team on inform required movin | nderstanding dget. vith Finance ation that is | | |

| Number. | Risk Title | | | | | | | Cluster. | | |
|---|--------------------------|-----------------------|-------------|---|---------------|---------------------------|--|-----------------------|-----|--|
| 7. | Budget S | etting. | | Financial. | | | | | | |
| Risk Rating: | ng: Owner. Chief Finance | | | | | | | · | | |
| Likelihood. | 5. | Impact. | 5. | RAG: | Very High | Current Risk Score: | 25. | Target Risk Score: | 15. | |
| Vulnerability. | | Trigger. | | Conseque | Consequences. | | • | Mitigating Actions. | | |
| Budgets are not set and approved prior to start of financial year and IJB will be operating without a formally agreed budget. Not receive budget off Partner be timeous meaning agreed budget. | | ers from dies in a | services wi | Unable to commission/decommission services with financial resources attached. | | | Ongoing discussions with partner bodies on more joined up working. | | | |

| | | Updated integration scheme to agree on how future budgets will be allocated. |
|--|--|--|
| | | baagoto niii bo anocatoai |

| Number. | Risk Title |). | | | | | Cluster. | | |
|---|---|---|--|---------------|-----------------------------|------------------------|---|---|--|
| 8. | Implication | ons of Natior | nal Care Servic | e. | | | Strategic. | | |
| Risk Rating: | Owner. | | Chief Office | r. | | | · | | |
| Likelihood. | 3. | Impact. | 3. | RAG: | Medium. | Current 9. Risk Score: | Target R Score: | Risk 6. | |
| Vulnerability. | • | Trigger. | | Consequences. | | Options. | Mitigatin | ng Actions. | |
| The Scottish Government's create a Natior Service and to functions of Int Joint Boards m the provision of Orkney. | nal Care amend the egration nay affect | relating to the adult care is not take accurring to the adult care is not take accurring to services in rural areas that eligibility may become challenging users should set of criteriand the positive higher of required for services are | for service ld a national ia be required; ssibility that costs of care | and protect i | by delivering e services | Treat. | Governm the Chair national i through t Group to full under | with the Scottish nent through COSLA, rs' and Vice Chairs' meetings, and the Chief Officers' ensure there is a rstanding of challenges. | |

| recognised and funded | | |
|-----------------------|--|--|
| appropriately. | | |
| | | |

| Number. | | Risk Title. | | | | | | Cluster. | |
|--|------------|-------------------------------------|---------------------------|--------------------------------|---|---------------------------|---|--|------|
| 9. | Isles Prim | ary Care Mo | del. | | | | | | |
| Risk Rating: | Owner. | | Head of Prin | nary Care and | Associate Me | dical Director | , Communit | y. | |
| Likelihood. | 4. | Impact. | 5. | RAG: | Very High. | Current Risk Score: | 20. | Target Risk Score: | 12. |
| Vulnerability. | -1 | Trigger. | 1 | Consequer | ices. | Options. | | Mitigating Acti | ons. |
| 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 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. | | ver available to island rithin INOC | | nunities have 4/7 provision | Escalated f Primary Ca risk registe | re to IJB | Urgent initial discussion around potential review of Model of Care to be undertaken. | | |
| | | all local res | ource options, | | | | Decision to make around whether introduction of NHS24 for isles communitie is required. | | |
| | | Increasing | | | | | | Review of Emergency Response responsibility with Scottish Ambulance Service. | |
| | | support Wo | • | | | | | Visit to Island Communities to discuss their needs. | |
| | | neighbourir surgeries fo | ty placed on ng branch | | | | | | |

| to increased anxiety / stress and associated impact on their performance. | |
|---|--|
| Reduced Staff Morale. | |
| Crisis management taking up Management time. | |
| High level Community concern. | |
| Reputational damage. | |