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Agenda Item: 9 .

Integration Joint Board

Date of Meeting: 17 June 2026.

Subject: Risk Register.

1. Purpose

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

2. Recommendations

It is recommended:

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

3. Background

3.1. The Integration Joint Board 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 on 30 April 2025.

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.

4. Key Highlights

4.1. Members of the Senior Management Team have spent some time reviewing the Risk Register to ensure the risks contained within the Register reflect the current position and ties in with some key Policies, Plans and Strategies.

4.2. Members will recall that the Board reviewed the Risk Register in September 2025, which can be found [here](#). At that time, there were 20 risks contained within the Register.

4.3. Previously there were three separate risks in relation to carers, this has been reviewed and is now a single risk.

4.4. Similarly, there were two separate risks in relation to Recruitment, Development and Retention of Workforce, this has been reviewed and collated into a single risk.

4.5. Following a review the following risks are being recommended to be removed from the Register:

Risk Area	Controls in Place	Rationale for Removal
<p>Commissioned Services: Economies of scale, lack of competition, choice or financial stability for tendered contracts.</p>	<p>Contract Standing Orders, Procurement and Financial Regulations in place.</p>	<p>This is an issue and not a risk. The Health and Social Care Partnership continues to procure services via existing frameworks where available.</p>
<p>Public Protection: Findings of the Children and Young People in Need of Care and Protection report. Findings of the Adult Support and Protection Inspection in 2023.</p>	<p>Public Protection committee and Child protection Sub-committees. Children's Services Strategic Partnership. Suicide Prevention Task Force.</p>	<p>Significant work has been done to strengthen processes. Amended RAG rating is Green (Target met).</p>
<p>Public Protection: The findings of both the Children and Young People in Need of Care and Protection and the Adult Support and Protection Inspection reports.</p>	<p>Improvement Plan from the joint Children and Young People in Need of Care and Protection inspection. The Adult Support and Protection Improvement Plan is now in place.</p>	<p>Significant work has been done to strengthen processes. Amended RAG rating is Green (Target met).</p>
<p>Public Protection: Vacancies in suitably qualified and experienced staff.</p>	<p>Public Protection Lead Officer and Public Protection Learning and Development Officer in post. Analysed learning</p>	<p>This action has been removed as is covered in the Recruitment, Development and Retention of Workforce risk.</p>

Risk Area	Controls in Place	Rationale for Removal
	reviews, subsequent action plans and training and development for the partnership.	Amended RAG rating is: Not Applicable.
<p>Implications of the National Care Service:</p> <p>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.</p>	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.	<p>This has been superseded by the Care Reform (Scotland) Act 2025 which leaves decision making at a local level.</p> <p>Amended RAG rating is: Not Applicable.</p>
<p>Analogue to Digital Switchover:</p> <p>Cost implications delaying progress of an accelerated switch from analogue to digital phone lines.</p> <p>Switch from analogue to digital planned for 31 January 2027 in Scotland.</p>	In November 2025, the Council's Policy and Resources Committee recommended a capital allocation of £317,000 for the purchase of digital telecare kit for the transition and new stock which is estimated to last in the region of 18-24 months. At the time of writing around £42,000 (13%) has been utilised.	<p>The testing phase of digital kit has been completed beyond other new devices coming to market.</p> <p>Planned installation will continue during 2026. Over 60% of Community Care Alarm have now been transition to Digital and are on track to meet the deadline.</p> <p>Amended RAG rating is Green (Target met).</p>
<p>Additional Investment Posts:</p> <p>There is a risk that the IJB will fail to identify the funding to commission the four additional investment posts as agreed in August 2023.</p>	Operational arrangements relating to AHPs has been altered to mitigate the impact whilst the Primary Care team continues to review structures within existing resources. This leaves two posts - Commissioning Officer and Community Led Support Officer.	<p>Further work is required relating to the cost/benefit analysis for both of these posts. Although there is a strong sense of spend to save, further work is underway to quantify and evidence this before a recommendation can be put to the Board.</p> <p>Amended RAG rating is Green (Target met).</p>

4.6. An updated Risk Register, attached as Appendix 1 to this report, takes account of those changes and now contains nine risks.

4.7. As Members will see, the Isles Primary Care Model risk has increased the risk rating of 9 (Amber) to 25 (Red). Due to contractual and workplace regulations there are challenges which could result in the Board being unable to maintain safe and effective care in the current configured model.

5. Contribution to quality

Please indicate which of the Orkney Community Plan 2025 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.
Enterprise: To tackle crosscutting issues such as digital connectivity, transport, housing and fuel poverty.	Yes.
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.	Yes.

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, equality and climate change implications

7.1. The development of this register is part of the process of identifying, managing and mitigating risks that could threaten the delivery of the Strategic Priorities and objectives.

7.2. There are no equality or climate change implications directly arising as a result of this report.

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. Authors and contact information

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11. Supporting documents

11.1. Appendix 1: Risk Register.

Orkney Integration Joint Board Risk Register



1. Objectives

The objectives of the Risk Register are to:

- Identify key risks that could prevent the achievement of the IJB's objectives.
- Evaluate the significance of the risks.
- Identify any mitigating controls.
- Identify the owner of each risk.
- Act as a basis by which the risks can be monitored and reported upon.

2. Risk Assessment

Identified risks are assessed and the following is determined:

- The likelihood of the risk materialising.
- The impact/potential consequences if it does occur.

3. Risk Evaluation

Risks are evaluated on a sliding scale of 1-25 with 25 being the highest value i.e. highest likelihood / most severe impact / consequences. The risk evaluation tables have been used in order to assess specific risks and to introduce a measure of consistency into the risk assessment process. The overall rating for each risk is calculated by multiplying the likelihood value against the impact value to give the total score.

Risk Evaluation Criteria

The Risk Evaluation Tables:Likelihood	
1	Extremely unlikely – will only occur in exceptional circumstances (likely to occur every 5 to 10 years).
2	Not expected to happen, but potential exists – unlikely to occur (likely to occur every 2 to 5 years).
3	May occur occasionally; has happened on occasions – reasonable chance of occurring (likely to occur annually).
4	Strong possibility that this could occur – likely to occur (likely to occur quarterly).
5	This is expected to occur frequently and, in most circumstances, – more likely to occur than not (likely to occur daily / weekly / monthly).

The Risk Evaluation Tables: Impact	
1	Negligible never happened but is theoretically possible
2	Minor – Potential to cause some damage in the short and medium term
3	Moderate – Potential to cause significant damage in the short and medium term
4	Major – Could seriously threaten reputation or weaken service delivery
5	Catastrophic – Will seriously threaten reputation or weaken service delivery

Risk Matrix

5	5	10	15	20	25
4	4	8	12	16	20
3	3	6	9	12	15
2	2	4	6	8	10
1	1	2	3	4	5
	1	2	3	4	5

- Key**
- Very High: Senior manager action to confirm the level of risk identified and produce an action plan to elimiate, 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 continue 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.

Summary of Risks

Risk Ranking	Risk Theme	Risk	Risk Rating
1	Financial	Savings Targets: Unable to deliver upon existing savings targets or any new savings imposed by either party.	20
2	Financial	Funding Resources: Uncertainty around the level and terms of future funding settlements and funding allocations.	15
3	Financial	Inflationary Pressures: Inflationary pressures driving up costs, in turn wage pressures	20
4	Financial	Annual Budget: Failure to set a balanced budget by 1 April each year.	12
5	Financial	Budget Control: Failure of budgetary control processes	25
6	Financial	Future Demographics: Ageing population, more children with complex needs, increase in demand.	20
7	Strategic	Isles Primary Care Model: Due to recruitment challenges, staff turnover, existing employment contracts, the need to comply with working time directives and historic access arrangements whereby national systems are bypassed, there is a risk that the IJB will fail to commission and deliver safe, effective and sustainable Primary Care Services to the ferry linked isles.	25
8	Strategic	Unpaid Carers: Support for all unpaid carers is not effectively planned for, managed or resourced.	16
9	Strategic	Recruitment, Development and Retention of Workforce: Difficulties to recruit posts in: Health and Community Care. Primary Care Services. Children, Families and Justice Services. Allied Health Professionals.	25
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IJB - Financial Risks

No	Risk Owner	Risk	Impact	Assessment of Risk					Controls in Place	Actions to be Taken	Review Date
				L	I	Score	Prior	Target			
1	Chief Finance Officer	Savings Targets: Unable to deliver upon existing savings targets or any new savings imposed by either party.	NHS Orkney being put in special measures.	5	4	20		16	Budget setting process.	Review where £2.4m recurring savings can be taken from.	30.11.26
2	Chief Finance Officer	Funding Resources: Uncertainty around the level and terms of future funding settlements and funding allocations.	Less funding from NHS Orkney and Orkney Island Council, reduction in ability to provide services, take on of other agencies' responsibilities.	5	3	15		9	Medium Term Financial Plan highlights reliance on funding from NHS Orkney and Orkney Island Council.	Estimate of reducing resources built into a Long Term Financial Plan	30.11.26
3	Chief Finance Officer	Inflationary Pressures: Inflationary pressures driving up costs, in turn wage pressures	Budget overspends, service reduction, or cuts	5	4	20	20	15	The Medium Term Financial Plan 2025-2028 includes assumptions on pay and inflation increases	Service review to determine areas requiring further funding.	30.11.26
4	Chief Finance Officer	Annual Budget: Failure to set a balanced budget by 1 April each year.	Breach of statutory provision Unable to commission/decommission services with financial resources attached.	3	4	12	12	6	The IJB is advised annually of the delegated budgets provided by each partner. Budget for 2025/26 approved in April 2025.	Ongoing discussions with partner bodies on more joined up working. Budget allocations should be sent by the IJB to both the Partners for the services they deliver. The budget should detail: service pressures, saving initiatives, and change initiatives.	30.11.26
5	Chief Finance Officer	Budget Control: Failure of budgetary control processes	Unexpected overspends against budgets requiring additional funding from NHS Orkney and/or Orkney Islands Council.	5	5	25		20	Budget monitoring, budget setting process	Create a Financial Recovery Plan to bring spend in line with budgets.	30.11.26
6	Chief Finance Officer	Future Demographics: Ageing population, more children with complex needs, increase in demand.	Additional costs	5	4	20		12	Medium Term Financial Plan assumptions include inflationary increases to help mitigate demographic pressures.	Work has begun via the Public Sector Reform to consider a partnership approach to changing the demographic profile.	30.11.26

IJB - Strategic Risks

No	Risk Owner	Risk	Impact	Assessment of Risk					Controls in Place	Actions to be Taken	Review Date
				L	I	Score	Prior	Target			
7	Head of Primary Care Services.	Isles Primary Care Model: Due to recruitment challenges, staff turnover, existing employment contracts, the need to comply with working time directives and historic access arrangements whereby national systems are bypassed, there is a risk that the IJB will fail to commission and deliver safe, effective and sustainable Primary Care Services to the ferry linked isles.	Gaps in provision - 24/7 presence compromised. Clinical risk associated with failure to access urgent/emergency care via NHS24/999. Staff not being provided with adequate rest periods - resulting in risks to patients and the current service being non compliant with legislation. Associated legal risk. Increased locum costs further impacting an already high cost delivery model.	5	5	25	9	4	Risk assess gaps in rota and move resources to Islands with largest anticipated need. Hospital switchboard to record direct contacts and ensure access to healthcare messages are delivered. New staff employed on fixed term contracts to limit the period of liability associated with lack of rest periods. Vacancy control panel aware of single handed nature of clinical services and the need to rapidly authorise locums, travel etc. All stakeholders sighted on financial pressures.	Review Isles model of care delivery model. Ensure any model mitigates the risks described.	30.11.26
8	Head of Health and Community Care.	Unpaid Carers: Support for all unpaid carers is not effectively planned for, managed or resourced.	Increased levels of stress placed upon unpaid carers leading to carer burnout. Carers no longer able to continue in their caring role Increased need for statutory care services, placing greater demands on services. Potential failure to meet existing and new legislation.	4	4	16	16	9	Two dedicated carer support posts have been created. Where possible respite within the service users own home is considered opposed to a place within a care facility.	Local campaign to engage carers at an earlier stage during 2026/27 with the aim of providing appropriate support at an earlier stage. Create a workstream to ensure appropriate identification of outcomes through adult carer support plans and young carer statement	30.11.26
9	Chief Officer	Recruitment, Development and Retention of Workforce: Difficulties to recruit posts in: Health and Community Care. Primary Care Services. Children, Families and Justice Services. Allied Health Professionals.	Service staff become overstretched. Service cannot manage within its resources. Increased levels of stress related absence. Key pieces of work are not being able to be undertaken. Service standards drop and vulnerable people are placed at risk. Health and Care (Staffing) requirements are not met nor the working time directive	5	4	25	25	9	Recruitment incentives in Social Care running including Golden Hello and Refer a Friend. Market Forces supplements being used to attract and recruit to hard to fill managerial posts. Launch of a Sponsorship and Trainee Social Work Partnership with Open University to produce qualified Social Workers over next 2, 4, 6 and 10 years. Introduction to a Career in Care course offered at Orkney College with guaranteed interviewxs to all who successfully complete. Scheme introduced in Dental Services to fund trainee dental nurses. Pharmacy development opportunity posts introduced.	Evaluate recruitment incentives. Social Work 'Grown Our Own' Scheme will continue to take two trainees per year. Social Care Workforce development work to be undertaken - looking at career pathways, establishments, roles and working patterns to maximise the capacity of the existing workforce and attract new employees. Engage with Scottish Government in relation to Displaced Workers Scheme and international sponsorships. Work with Isles communities to explore different models for attracting clinicians to live and work on our ferry linked isles. Recruitment open days to be held in the new care home before residents move in.	30.11.26