

Risk No.	Description of Risk	Type - Strategic, Operational, People, Financial, Infrastructure	Negative Consequences	Pre-Mitigation Assessment			Mitigating Actions / Controls	Controlled			Last Review Date	Risk Owner	Status
				Impact	Likelihood	Risk Rating		Impact	Likelihood	Risk Rating			
1	Property: significant investment of £1.5 million as of May 2023 is required to the fabric and mechanical and electrical systems over the next 10 years to bring the property up to suitable living standards and be fit for purpose. Without the required improvements and investment the property will decline further with increased risk of failures and this could lead to hazards and health risks for residents.	Infrastructure	<ul style="list-style-type: none"> <li>-SCC strategic direction to move to more appropriate accommodation would be compromised</li> <li>-Buildings become unsafe for residents and they may need to move out earlier than planned</li> <li>-Breakdown of equipment</li> </ul>	5	3	15	<ul style="list-style-type: none"> <li>-Monthly meetings between Land &amp; Property and Service Delivery</li> <li>-Land &amp; Property will respond to any immediate H&amp;S risks while there are residents in the building</li> <li>-The building compliance and servicing regime is in place</li> </ul>	4	1	4	03/05/2023	Land & Property Lead for Adult Social Care	G
2	Quality: COC compliance is not maintained as loss of staff means services are unable to maintain safe staffing levels and staff focus on their personal situation rather than care provision.	Operational	<ul style="list-style-type: none"> <li>-Cost impact of staffing turnover, use of agencies and lack of staff who know the residents well</li> <li>-National staff shortages in social care</li> <li>-Potential negative 'press' and resulting loss of reputation and trust</li> </ul>	5	3	15	<ul style="list-style-type: none"> <li>-Review COC standards evidence</li> <li>-Engage with COC during the process</li> <li>-Active monitoring of service and staffing numbers</li> <li>-Regular SCC Senior Manager and QA Manager visits to the service and available for discussion</li> <li>-Quality Assurance audits as required</li> </ul>	4	2	8	03/05/2023	Senior Manager	G
3	Operations: negative impact of the service change on the health and wellbeing of people who use services because of uncertainty amongst them and their carers.	Operational	<ul style="list-style-type: none"> <li>-Uncertainty impacts the behaviours of residents</li> <li>-Families, carers, friends and staff intentionally or unintentionally transfer their anxieties onto residents</li> <li>-Staff do not plan for, recognise, and/or react to changes in people's behaviours</li> <li>-Stress and anxiety felt by individuals and their families</li> <li>-Wellbeing of individuals affected</li> <li>-Potential negative 'press' and resulting loss of reputation and trust</li> </ul>	4	3	12	<ul style="list-style-type: none"> <li>-Person centred approach at heart of all conversations</li> <li>-Dedicated Social Workers for the project</li> <li>-Commissioner works to good practice and monitors the impact of the change through regular project meetings</li> <li>-Work closely with individuals, families and carers throughout the process</li> <li>-Keep people informed as new or different opportunities arise</li> <li>-Care needs assessments identify potential outcomes for each individual</li> <li>-Monitor activity - actions reviewed on a regular basis with key workers</li> <li>-Actively update and involve current carers in assessment process</li> <li>-Regular conversations to ensure any signs of negative impacts on individuals are identified early</li> <li>-Assure practice is thorough and documentation complete, highlighting the journey experienced by each individual with the aim of identifying what an improved outcome may look like</li> </ul>	3	3	9	03/05/2023	Senior Manager	G
4	Communication: lack of clarity for staff and stakeholders as communications are confused and not given in a timely way.	People	<ul style="list-style-type: none"> <li>-A person centred approach is not maintained</li> <li>-Quality of outcome is compromised</li> <li>-Mixed messages and confusion between all parties</li> <li>-Staff and resident wellbeing affected</li> </ul>	5	4	20	<ul style="list-style-type: none"> <li>-Development of stakeholder engagement plan</li> <li>-Meetings with families at an early stage</li> <li>-Service responds promptly to requests for meetings</li> <li>-Regular meetings between Service Delivery staff, commissioners and Learning Disability &amp; Autism Team to address issues promptly</li> <li>-Regular updates provided to staff and stakeholders</li> </ul>	4	2	8	03/05/2023	Senior Manager	G
5	Workforce: loss of staff before service change compromises ability to continue to provide care because of increased staff vacancies, pressure on remaining staff, unclear communication about the impact on the workforce.	People	<ul style="list-style-type: none"> <li>-Potential service disruption / reduced quality of service</li> <li>-Increased staff sickness and absence</li> <li>-People choose to move to alternative employment</li> <li>-Additional agency and bank staff employed</li> <li>-Risk of breakdown in communication if no strong shift leader in place</li> <li>-Staff training lapses</li> </ul>	5	4	20	<ul style="list-style-type: none"> <li>-Majority of staff are committed to supporting residents</li> <li>-Daily review of staffing requirements against the care and support needs of residents</li> <li>-Shifts covered by bank staff or staff employed at other in-house care services</li> <li>-Ongoing timely comms to keep staff, managers and stakeholders updated</li> <li>-Wellbeing support made available</li> <li>-SCC Senior Manager for PLD Services available for discussion</li> <li>-Ongoing discussion with SCC unions</li> <li>-Reemployment and training opportunities for staff</li> <li>-Support from Area Support Manager from GP services who has experience of PLD services</li> </ul>	4	2	8	03/05/2023	Senior Manager	G
6	Operations: unable to source suitable alternative provision	Operational	<ul style="list-style-type: none"> <li>-Lack of alternative provision within the local area identified at point of consultation raises anxiety</li> <li>-Care providers do not provide services to meet assessed care needs of residents</li> <li>-Competing demand for limited services</li> <li>-Competition for resources may impact on cost of care or increase length of time taken to support moves and decommissioning of Arundel</li> <li>-Potential negative 'press', loss of reputation and trust</li> </ul>	5	3	15	<ul style="list-style-type: none"> <li>-Residents continue to live at Arundel until appropriate alternative care is found</li> <li>-Senior Commissioning Manager to identify alternative services in the area</li> <li>-Discussion with market to develop options as care and support needs are established</li> </ul>	4	3	12	03/05/2023	Learning Disability & Autism Team Manager, Lead Commissioner	A
7	Timing: there is insufficient resource to support the implementation of the project because of other priorities for the project group and a lack of available staff in the LD & A Moving on Team to support reassessments.	Operational	<ul style="list-style-type: none"> <li>-People's expectations may not be managed</li> <li>-Opportunities may be missed</li> <li>-People are not supported to understand the need to move to a new home that can better meet their needs and aspirations</li> <li>-High number of residents request an early move</li> </ul>	5	3	15	<ul style="list-style-type: none"> <li>-Dedicated social workers for the project</li> <li>-Monitoring at weekly project meetings</li> <li>-Ongoing timely comms with the LD &amp; A Moving on Team and managers to help manage workload</li> <li>-Work alongside the LD &amp; A Moving on Team to forward plan</li> <li>-Dedicated staff allocated by the LD &amp; A Moving on Team</li> <li>-Escalate issues if required</li> </ul>	4	2	8	03/05/2023	Learning Disability & Autism Team Manager	G
8	Covid-19: the pandemic and potential outbreak in the home leads to delays because of infection rates amongst residents and staff.	Operational	<ul style="list-style-type: none"> <li>-Delays to project</li> <li>-Restrictions on movement</li> <li>-Visits cannot take place, which delays assessments, potential moves</li> <li>-Infected keyworkers are unable to support with moves</li> </ul>	4	3	12	<ul style="list-style-type: none"> <li>-Staff and residents have been vaccinated</li> <li>-Follow risk assessments to minimise risks</li> <li>-Undertake preparatory work, so plans can progress as soon as restrictions are lifted</li> <li>-Use technology to facilitate meetings and discussions with families and staff</li> </ul>	4	2	8	03/05/2023	Senior Manager / Learning Disability & Autism Team Manager	G
9	Stakeholder feedback: potential increase of concerns from families or people using services about the service closure leads to delays.	People	<ul style="list-style-type: none"> <li>-Resident wellbeing affected</li> <li>-Timescales are extended</li> <li>-Anxiety amongst staff</li> <li>-Increased staff sickness and absence</li> <li>-Potential service disruption / reduced quality of service</li> <li>-Potential negative 'press' and resulting loss of reputation and trust</li> </ul>	4	3	12	<ul style="list-style-type: none"> <li>-SCC has previous experience of moving individuals to more suitable accommodation, so can reassure families</li> <li>-Friendship groups will be considered as part of the assessments</li> <li>-Individuals in supported living may be able to apply for additional benefits</li> <li>-Ensure communications are clear for all stakeholders about what the change will mean for all involved</li> </ul>	3	3	9	03/05/2023	Senior Manager	G

**High** Risk Ratings between 16 - 25 (high): Major risks that require immediate attention.  
**Medium** Risk Ratings between 12 - 15 (medium): Significant risks to be monitored.  
**Low** Risk Ratings below 12 (low): To be monitored.

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