





1	1	<p>We fail to ensure that our system of regulation meets the needs of people who use services and workers.</p> <p>Cause:</p> <p>We take too long to make a decision, or make an indefensible decision due to:</p> <ul style="list-style-type: none"> Insufficient staff as a result of increased referrals as our register expands, or external factors we cannot control such as the Scottish Abuse Inquiry, or errors in our resource model assumptions, <u>staff capacity being affected by COVID-19, recruitment being delayed due to COVID-19, we are unable to use overtime to mitigate staff depletion due to EMT decision at start of COVID-19</u> Ineffective quality assurance, decision-making frameworks or systems. <p>Our processes and approach have a negative impact on those affected by them.</p> <p>Our legislative framework is a structural barrier to flexible working across care.</p> <p><u>Our response to COVID-19 means that people are working unregistered or without their fitness to practise being assessed</u></p> <p>The impact of Covid-19 means that other agencies are unable to provide us with the information we need to make fitness to practise decisions or we are unable to hold a fitness to practise hearing.</p> <p><u>Failing to respond proportionately to COVID-19 means that limited workforce capacity is spent responding to regulatory requirements.</u></p> <p>Consequence:</p> <p>A worker is on the register who is not fit to practise and as a consequence a service user is harmed.</p> <p>Care cannot be delivered in a person-centred way because of barriers caused by registration and fitness to practise approach and processes, which leads to poorer outcomes for people using services.</p> <p>A worker leaves the sector unnecessarily because of our processes and decisions, which compromises the ability for care to be delivered to people using services.</p> <p>Our processes have a detrimental impact on workers and it affects their health and personal circumstances.</p> <p>The public lose confidence in the profession and us as regulator.</p>	5	4	20	<p>Existing Mitigation and Controls</p> <p>Rules and frameworks based on risk in place to ensure legal compliance, fairness and consistency.</p> <p>Digital systems to manage our processes and casework, with ongoing development of those systems</p> <p>Resource modelling for calculating our staff base.</p> <p>Quality assurance and audit process in place for staff and panel decision making.</p> <p>Publicising hearing outcomes and decisions.</p> <p>Improved triage system implemented in November 2019 to decrease the number of referrals that are opened as cases requiring full investigation.</p> <p>Use of external legal presenter services to undertake conduct of panel hearings to provide additional capacity.</p> <p>Use of overtime to provide additional capacity.</p> <p><u>Proportionate response to COVID-19, temporarily pausing or scaling back some regulatory requirements and expanding others.</u></p> <p>Use of technology to hold remote hearings.</p> <p>Planned Mitigation and Controls</p> <p>Implementation of Opt-in Hearings which will reduce the number of hearings held – has been affected by Covid-19 due to Scottish Gov resources. Estimated implementation of October <u>July</u> 2020.</p> <p>Service redesign project – in early planning stages. Has been delayed due to Covid-19. Will likely start in quarter three.</p> <p>Officers are working with the Abuse Inquiry Panel to determine the required input from SSSC.</p> <p>Change to the structure of our register to make it less bureaucratic and therefore more supportive of a dynamic workforce and require less internal resources to maintain – long-term project for completion by 2022.</p>	4	4	16	Director of Regulation	
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		<u>The workforce does not have sufficient capacity to provide care and support to people who use services because they are responding to our regulatory requirements</u>				Scoping work being carried out in conjunction with Scottish Government and the Care Inspectorate has been delayed due to COVID-19. Recruitment of additional staff to bring fitness to practise workforce up to modelled requirements has been delayed due to COVID-19. <u>It should be completed by the end of August.</u> Working from home has affected our capacity to induct and train new staff. <u>This should be mostly mitigated by the end of August as schools and childcare services resume service provision.</u> Review of fitness to practise referral criteria - <u>Our temporary amendment to our referral criteria in response to Covid-19 has reduced the incoming workload to a manageable level for current staff numbers, given that staff productivity is affected by the impact of working from home. We will use this time to review the criteria and propose any appropriate amendments which help target our resources at the appropriate cases which require regulatory intervention. Planned implementation date 1 October 2020.</u> <u>Resumption of overtime in Fitness to Practise will be discussed at EMT in July.</u>					
2	2 3	We fail to ensure that our workforce development function supports the workforce and employers to achieve the right standards and qualifications to gain and maintain registration Cause: Our contribution to developing resources does not meet the needs of registrants and employers. Our standards don't meet the needs of employers. Limited funding for individuals and employers to support formal learning. <u>Our legislative framework is a structural barrier to flexible working across care.</u> Individuals are not able to complete qualifications. Consequence: Workers are not registered or removed from the register, leading to gaps in service delivery which affects the delivery of care to people using services. Reduced confidence of public protection. Existing qualifications and standards do not support new models of care. Workers are unable to adhere to the SSSC codes of practice.	4	4	16	The SSSC produce a quarterly workforce intelligence report on qualification conditions used at a national and local level by SG and employers to support employers plan for the qualification's conditions required for their workforce to be registered with the SSSC. Through our workforce planning activity, we will publish data on training provision across Scotland to meet this demand. Using our workforce planning data, we are working with Skills Development Scotland, the Scottish Qualifications Authority and Scottish Government in relation to the capacity and resources required for the 65,000 workers to gain a qualification. <u>Can we clarify if this relates to number of people or number of registrations</u> We are working with Scottish Care and CCPSs on the promotion and allocation of funding to employers. This includes the voluntary sector development fund and individual learning accounts and work with NES and the student awards agency Scotland to raise awareness of the part time grant fee. We have developed career pathways resources to promote a career in social care	3	3	9	Director of Development and Innovation	

					<p>which link to qualifications funding and registration.</p> <p>Working with the College sector to further develop social care academies across Scotland and the sharing of resources.</p> <p>Planned actions</p> <p>Review of the register (linked to risk 1).</p> <p>Work is underway with SQA, SDS and the college sector in the review of the design standards and quality assurance of qualifications e.g. SVQ's and modern apprenticeships.</p> <p>The SSSC is part of the UK Skills for Care and Development Partnership, and the Sector Skills Council for social service workers in Scotland. As a result of the pandemic we are reviewing with our UK partners whether the current National Occupational Standards (NOS), which underpin qualifications for registration with the SSSC, continue to meet the needs of employers and the workforce post COVID-19</p> <p>The Scottish Government campaign to recruit people to work in adult social care launches on 27 January 2020.</p> <p>Under the regulatory changes the SSSC made in March we extended qualification conditions for registrants to allow them an additional 12 months to gain their qualification. Work is underway to understand the impact of this decision and the unintended consequences on the SSSC strategic performance measure 'percentage of registrants achieving their qualification' within the original agreed timescale</p> <p>we will also consider the impact of decisions taken by national bodies such as Scottish Qualifications Authority (SQA) in extending timescales for the completion of vocational awards to allow time for the completion of SVQs for those who have had to suspend their studies.</p> <p>The SSSC is an advisor to the campaign team providing expertise, evidence and knowledge to inform and set the direction of the campaign which resulted in a focus on recruiting to adult social care, the area of the sector where recruitment is most challenging.</p> <p>The SSSC was involved in the research for the campaign and has worked closely with the Scottish Government policy team and marketing team to ensure that the messaging and content of the campaign aligns with other aspects of social care career and workforce development e.g. the campaign website content and the links with the SSSC's new careers in care website, both of which promote information about the experience and qualifications required.</p>			
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3	1	<p>We fail to meet corporate governance, external scrutiny and legal obligations</p> <p>Cause: Corporate governance arrangements that are not effectively discharged at the right level. Insufficient project management. Unclear policies and procedures. Lack of management.</p> <p>Consequence: Loss of credibility. Conflicts of interest. Fraud. Data breach/loss. Information and records management does not comply with legislative requirements. Reduced quality of challenge and oversight. Reduced public confidence. Qualified audit. Further section 22 <u>action</u>. Failure to deliver strategic objectives.</p>	4	4	16	<p>Current review of corporate governance to rationalise and streamline structure.</p> <p>Section 22 report improvement -action plan updated at quarterly committee with progress.</p> <p>Shared services review ongoing – due to be completed July <u>October</u> 2020</p> <p>New PMO approach in place</p> <p>Planned Actions</p> <p>-Policy library review underway and new policy writing guidance issued. Recent data breach reported to ICO and new security measures being implemented.</p>	2	2	4	<p>Director of Strategy and Performance Director of Finance and Resources</p>	↔
4	1 2 3	<p>We fail to plan and resource our activities to deliver our digital strategy.</p> <p>Cause: Poor project options appraisal, scoping and business case development. Insufficient funds allocated. Lack of staff, skills and knowledge. Lack of project management and governance. Lack of IT policies.</p> <p>Consequence: Additional expenditure. Projects not completed; digital strategy outcomes not delivered/strategic outcomes not achieved. Reduced confidence in system processing. -Failure to register people on time. Potential loss of data. ICT downtime. Vulnerable to cyber attacks</p>	4	3	12	<p>Digital Programme for 2020/21 developed</p> <p>Planned actions</p> <p>Publish new Digital Strategy – June 2020 – delayed due to covid planned for early 2021</p> <p>Procurement project to re-provision maintenance and development contract – November 2020</p> <p>New IT security policy to be implemented March 2020 – to be agreed at May <u>New ICT Policy agreed</u></p> <p>Planned actions</p> <p><u>New 2020/21 Digital Programme to be agreed at July Digital Programme Board</u></p> <p>Publish new Digital Strategy - June 2020 – delayed due to covid planned for early 2021</p>	3	3	9	<p>Director of Strategy and Performance</p>	↔
5	1	<p>We fail to provide value to our stakeholders and demonstrate our impact.</p> <p>Cause: Impact of the Independent care review. Use of complex and formal language. People don't understand how we make decisions. Insufficient management of key relationships. Stakeholders do not have the capacity/resources to engage. We don't lead nationally on core SSSC functions. Limited ability/resource to market the role of SSSC.</p>	3	4	12	<p>Discovery project for the personalisation of MySSSC underway. Business case for large scale user research to develop MySSSC functions and Digital Strategy to be agreed at July Digital Programme Board</p> <p>Reviewed Involving People with lived experience to a model of joint working with CI Involving People Group.</p> <p><u>New interim communications strategy produced and agreed at Council due to</u></p>	3	3	9	<p>Director of Strategy and Performance</p>	↔

		<p>Increased scrutiny due to decision making around covid-19 at a national level.</p> <p>Consequence: Reduced public confidence. Lack of stakeholder involvement/engagement in delivery of strategic outcomes not achieved. Stakeholder voice is not heard. Poor perception of registration. Under utilisation of SSSC resources.</p>				<p>Covid-19. This replaced the previously planned work. Please refer to Strategy for detail of activity.</p> <p>Strategic measures for gathering data for strategic plan include views and perception of stakeholders agreed at Council</p> <p>Scoping of a best value plan for 2020-2023.</p> <p>Planned actions</p> <p>Review of outcomes based budgeting approach to commence in late 2020.</p> <p>New interim communications strategy produced and agreed at Council due to Covid-19. This replaced the previously planned work. Please refer to Strategy for detail of activity.</p>					
6	1 2 3	<p>We fail to develop and support SSSC staff appropriately to ensure we have a motivated and skilled workforce to achieve our strategic outcomes.</p> <p>Cause: Lack of a strategic workforce plan and ineffective workforce planning at directorate and team level. Lack of effective monitoring of workload and capacity. Lack of an effective staff learning and development plan. Managers are unaware of their duties in relation to supporting staff. Lack of managed mandatory training programme. No consistent approach to development discussions. No consistent approach to leadership and management development. No mentoring programme for new staff. Outcomes of job evaluation.</p> <p>Consequence: High turnover of staff. Loss of IIP status. Inability to deliver our strategic objectives. Dismissal of staff due to poor performance. Unfair/constructive dismissal claim. Legal claim under Equalities act. Reputational damage. Reduced ability to influence change and policy development.</p>	5	4	20	<p>OD review completed and 6 areas of high priority work have been developed <u>and are progressing</u>.</p> <p>OD Programme Board established to take forward the work required to oversee delivery</p> <p>New Head of OD <u>and Employee Development Adviser</u> posts established and will<u>should</u> be in post August<u>July</u> 2020.</p> <p><u>Review of the impact of job evaluation-JEGS process has highlighted significant anomalies. Issues with pay and grading structure to be addressed and further scoping work required.</u></p>	3	3	9	Chief Executive	
7	1	<p>The SSSC fail to secure sufficient budget resources to fulfil the financial plans required to deliver the strategic plan.</p> <p>Cause: Cause:</p>	4	5	20	<p>Financial Strategy that considers current plus the next 6 years is in place and reviewed annually (last reviewed in June 2019; next review September 2020).</p>	4	3	12	Director of <u>Corporate Services</u> <u>Finance and Resources</u>	

	<p>Inability to convince Scottish Government as main funding source of our strategic priorities. Single year funding settlements to support a three-year strategic plan. The SSSC does not have up to date, comprehensive, forward looking financial plans aligned to the strategic plan. Failure to meet financial targets. Fee income is not in line with projections. Grant in Aid is reduced. Late notification of SG budget allocations. Financial implications of the COVID-19 pandemic affecting public finances.</p> <p>Consequence: Adverse impact on our ability to deliver our strategic objectives. Reputational damage. Reduced confidence in our protection arrangements. Reduced future funding. Reduced ability to influence change and policy development.</p>				<p>2020 Financial Strategy review will include alignment to the new strategic plan that is currently being developed.</p> <p>Audit and Assurance Committee consider an assurance report that integrates the financial position, organisational performance and risks at each of its meetings.</p> <p>Budget performance reviewed at directorate and EMT level on a monthly basis.</p> <p>Strategic finance capacity bolstered by the appointment of a Director of Finance and Resources to work exclusively for the SSSC. Objective based budget planning <u>to</u> commenced.</p> <p>Resource models reviewed and updated and regularly compared to the actual position.</p> <p>Planned actions</p> <p>Financial strategy review to include scenario planning. Development of a revised fees policy.</p> <p>Close monitoring of the impact of COVID-19 on the progress of projects and the collection of fee income.</p>					
8	<p>The current Business Continuity <u>Plan (BCP)</u> in place, is not up to date, for the SSSC.</p> <p>Cause: Revision of BCP was suspended pending completion of the digital transformation programme. Availability of resources to take forward the updating of business impact assessments and recovery plans. Untested plans.</p> <p>Consequence: Modified audit options. Loss of front line services to registrants with no recovery plan. Mismanagement of major incident .</p>	4	5	20	<p>Due to Covid-19 our plans were updated, and a new process has been defined earlier than planned.</p> <p>Action Records and debriefing templates are being used to define the new process which will be rolled out earlier than expected in August 2020.</p> <p>Planned actions</p> <p>Timetable for future testing of plans to be agreed.</p>	2	2	4	Chief Executive	

9		<p>The SSSC is unable to operate due to effects of global pandemic COVID-19.</p> <p>Cause: COVID-19 flu pandemic Delivery of services operating in an uncertain environment with changes to practice and controls. Direct instruction from Scottish Government to respond to sector needs.</p> <p>Consequence: Financial losses due to not chasing of fees. Business Plan objectives will not be achieved. Increase the demand on SSSC service due to temporary changes to regulation and Impact on the availability of staff to run core services. Panic buying could limit SSSC's ability to purchase items to support the sector. 3rd party staffing levels may not be sustained to support SSSC core functions. Risk to the safety of service users by changing our approach to regulation to increase capacity in the sector. Inability to flex our statutory functions and which creates a barrier to the workforce being able to respond to the pandemic. Our infrastructure and working practices do not support home working. Our staff are not supported.</p>	5	5	25	<p>Please refer to business impact assessment for breakdown of operational risks. Other actions include:</p> <p>Daily monitoring of SG guidance.</p> <p>Business continuity plan enacted—detail operation plans</p> <p>Weekly liaison with SG, other regulators and supporting stakeholders Review of business plans to identify what is not achievable in 202/21. EMT to agree late May</p> <p>Changes to the register and fitness to practise to support increased capacity in the sector</p> <p>Changes to student places to support increased capacity to the sector</p> <p>Work with NES on a hub for recruitment into social care Recovery plan process now active and return to business as usual is being pursued in accordance with Scottish Government Route Map.</p> <p>New areas of work have been identified and business plans reviewed to take account of the needs of the sector in light of the COVID-19 response.</p>	5	3	15	Chief Executive	
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RISK SCORING MATRIX

Table 1 Impact scores

	Consequence score (severity levels) and examples of descriptors				
	1	2	3	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety of, staff or public (physical/psychological harm)	Minimal injury requiring no/minimal intervention or treatment. No time off work	Minor injury or illness, requiring minor intervention Requiring time off work for >3 days	Moderate injury requiring professional intervention Requiring time off work for 4-14 days RIDDOR/agency reportable incident An event which impacts on a small number of stakeholders	Major injury leading to long-term incapacity/disability Requiring time off work for >14 days Mismanagement of cases with long-term effects and impacts of service users	Incident leading to death Multiple permanent injuries or irreversible health effects An event which impacts on a large number of stakeholders
Quality/complaints/audit	Peripheral element of treatment or service suboptimal Informal complaint/inquiry	Overall service suboptimal Formal complaint (stage 1) Local resolution Single failure to meet internal standards Minor implications if unresolved Reduced performance rating if unresolved	Service has significantly reduced effectiveness Formal complaint (stage 2) complaint Local resolution (with potential to go to independent review) Repeated failure to meet internal standards Major implications if findings are not acted on	Non-compliance with national standards with significant risk if unresolved Multiple complaints/ independent review Low performance rating Critical report	Totally unacceptable level or quality of service Gross failure of findings not acted on Inquest/ombudsman inquiry Gross failure to meet national standards
Human resources/ organisational development/staffing/ competence	Short-term low staffing level that temporarily reduces service quality (< 1 day)	Low staffing level that reduces the service quality	Late delivery of key objective/ service due to lack of staff Unsafe staffing level or competence (>1 day) Low staff morale Poor staff attendance for mandatory/key training	Uncertain delivery of key objective/service due to lack of staff Unsafe staffing level or competence (>5 days) Loss of key staff Very low staff morale No staff attending mandatory/ key training	Non-delivery of key objective/service due to lack of staff Ongoing unsafe staffing levels or competence Loss of several key staff No staff attending mandatory training /key training on an ongoing basis
Statutory duty/ Governance/inspections	No or minimal impact or breach of guidance/ statutory duty	Breach of statutory legislation Reduced performance rating if unresolved	Single breach in statutory duty Challenging external recommendations/ improvement notice	Enforcement action Multiple breaches in statutory duty Improvement notices Low performance rating Qualified audit	Multiple breaches in statutory duty Prosecution Complete systems change required Zero performance rating Severely critical report
Adverse publicity/ reputation	Rumours Potential for public concern	Local media coverage – short-term reduction in public confidence Elements of public expectation not being met	Local media coverage – long-term reduction in public confidence	National media coverage with <3 days service well below reasonable public expectation	National media coverage with >3 days service well below reasonable public expectation. MP concerned (questions in the House) Total loss of public confidence
Business objectives/ projects	Insignificant cost increase/ schedule slippage	<5 per cent over project budget Schedule slippage	5–10 per cent over project budget Schedule slippage	Non-compliance with national 10–25 per cent over project budget Schedule slippage Key objectives not met	Incident leading >25 per cent over project budget Schedule slippage Key objectives not met
Finance including losses and claims	Loss or compensation of under £1,000	Loss of up to £25k of budget Loss or compensation less than £10,000	Loss of £25k+ to £100k of budget Loss or compensation between £10,000 and £50,000	Uncertain delivery of key objective/Loss of £100k+ to £500k of budget Loss or compensation between £50,000 and £1150,000 Purchasers failing to pay on time	Non-delivery of key objective/ Loss of >£500k of budget Failure to meet specification/ slippage Loss of contract / payment by results Loss or compensation >£150,000
Service/business interruption Environmental impact	Loss/interruption of >1 hour Minimal or no impact on the environment	Loss/interruption of >8 hours Minor impact on environment	Loss/interruption of >1 day Moderate impact on environment	Loss/interruption of >1 week Major impact on environment	Permanent loss of service or facility Catastrophic impact on environment
Breaches of confidentiality involving person identifiable data (PID), including data loss	No significant reflection on any individuals or body. Media interest very unlikely	Damage to an individual's reputation. Possible media interest, e.g. celebrity involved	Damage to a team's reputation. Some local media interest that may not go public	Damage to a service reputation/ low key local media coverage Damage to an organisation's reputation/ local media coverage	Damage to SSSC reputation/ National media coverage. Serious breach with potential for ID theft or over 1000 people affected
	Minor breach of confidentiality. Only a single individual affected	Potentially serious breach. Less than 5 people affected or risk assessed as low, e.g. files were encrypted.	Serious potential breach & risk assessed high, e.g. unencrypted file lost. Up to 20 people affected.	Serious breach of confidentiality, e.g. up to 100 people affected	

Table 2 Probability score (L)

What is the likelihood of the consequence occurring?

The frequency-based score is appropriate in most circumstances and is easier to identify. It should be used whenever it is possible to identify a frequency of occurrence.

Likelihood score	1	2	3	4	5
Descriptor	Rare	Unlikely	Possible	Likely	Almost certain
Frequency How often might it/does it happen	This will probably never happen/recur	Do not expect it to happen/recur but it is possible it may do so	Might happen or recur occasionally	Will probably happen/recur but it is not a persisting issue	Will undoubtedly happen/recur, possibly frequently

Table 3 Risk rating = consequence x likelihood (C x L)

Consequence scores (C)	Likelihood scores (L)				
	1	2	3	4	5
	Rare	Unlikely	Possible	Likely	Almost certain
5 Catastrophic	5	10	15	20	25
4 Major	4	8	12	16	20
3 Moderate	3	6	9	12	15
2 Minor	2	4	6	8	10
1 Negligible	1	2	3	4	5

For grading risk, the scores obtained from the risk matrix are assigned grades as follows

1 - 3	LOW risk
4 - 6	MODERATE risk
8 - 12	HIGH risk
15 - 25	EXTREME risk

Instructions for use

1. Define the risk(s) explicitly in terms of the adverse consequence(s) that might arise from the risk.
2. Use table 1 to determine the consequence score(s) (C) for the potential adverse outcome(s) relevant to the risk being evaluated.
3. Use table 2 to determine the likelihood score(s) (L) for those adverse outcomes. If possible, score the likelihood by assigning a predicted frequency of occurrence of the adverse outcome. If this is not possible, assign a probability to the adverse outcome occurring within a given time frame, such as the lifetime of a project. If it is not possible to determine a numerical probability then use the probability descriptions to determine the most appropriate score.
3. Calculate the risk rating by multiplying the consequence score by the likelihood score:
C (consequence) x L (likelihood) = R (risk score)
4. Identify the level at which the risk will be managed in the organisation, assign priorities for remedial action, and determine whether risks are to be accepted on the basis of the colour bandings and risk ratings, and the organisation’s risk management system. Include the risk in the organisation risk register at the appropriate level.

Scoring system in the trend column of the summary tables

In the trend section up to 6 months is judged as ‘improving’ greater than six months is ‘gradually improving’ and ‘steady’ is self explanatory.