There is a risk that: Equipment / Assistive Technology / Di	How likely is the risk to materialise? Please rate on a scale of 1-5 with 1 being very unlikely and 5 being very likely	Please rate on a scale of 1-5 with 1 being a relatively small impact and 5 being a major impact And if there is some	Overall risk factor (likelihood *potential impact)	Risk Owner	Mitigating Actions
If effective planning for equipment requirements is not sufficiently factored in, then associated equipmentfinancial pressures may impact on system wide benefits.	4	3	12	ICB	System business cases to include equipment requirements in Financial budget pressures for equipment planned for in BCF plans for 17/18 and 18/19. Reviewing options for more integr equipment/AT and DFG. Preventative uses of DFG being util monitoring of equipment budget pressures and ongoing revie
If approaches to equipment are not fully embedded in business as usual practices, then early intervention and prevention impacts will not be maximised.	3	3	9	PCC/CCC/CCG	New service models to include equipment considerations and implementation plans. Strategic system wide working group review approaches. Workforce development requirements co implemented.
VCS Joint Commissioning					
Financial and resource limitations may limit extent of activity and will need to be fully understood and considered by the appropriate organisation / governance structure.	3	3	9	PCC/CCC/CCG	Joint commissioning approach established to support best use of rebest practice and guidance from Ageing Well adopted by local com of Wellbeing Network to ensure appropriate community provision S allocated to key areas of work Community resilience key strand of v Councils.
Ageing Well - Falls Prevention					
If the populatuon and demand predictions are underestimated then there will be increased costs to the health and social care system, reducing the full impact of benefits	3	3	9	CCG	Public health trajectories utilised to model predictions working group overseeing implementation oversight of project by STP PCIN to review effectiveness
If communications are not effective at reaching the targeted audience, then the service will not target the required number of people.		3	9	ccg	Communications plan and Comms team engagement Training and workforce development learning from pilot rolled out
If there is a hgh staff turnover rate, this will impact on the necessary resources being deployed to deliver the project activities and will reduce consistency of delivery	3	2	6	CPFT	Working group overseeing implementation to ensure consist implementation plan established with clear responsibilities review and monitoring of implmementation progress
If there are inadequate information systems to support whole system patient journey analyses, then interventions will not be targetted to maximise effective patient outcomes	2	3	6	ссб	public health input into ongoing project implementation and e system wide STP owenership to project system partner representation on working group ongoing review and monitoring of effectiveness of project
If Therapy Teams do not adopt the new systems and processes then the new service will not be implemented to full effect.	2	4	8	CPFT	Learning from the falls pilot to be rolled out Workforce training and development plan established
Ageing Well - Atrial Fibrillation					
If GPs do not engage with the project fully, then it will impact on the ability to implement the project	3	4	12	CCG	Project responsibility to be shared with LMC Comms Team to engage with GP practices Comms plan established and agreed
If suitable patients are not identified, then the intended benefits will not be realised. If suitable patients do not want to take	3	2	6	CCG/GPs	GP education Clinical decision on suitability/risk Monitoring of effectiveness of project GP to educate patient on the risks of not taking anticoagulan
anticoagulants, then this will impact on the ability to deliver the nefits	3	2	6	GPs	All responses should be documented to understand issues GP communications

ments in modelling. In BCF expenditure re integrated use of being utilised. Close ing review of approaches.
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