No.	ID	Category	Description	Impact	Identified by	Impact	Probability	Score	RAG Status	Proximity	Gross Score	Gross RAG Status	Mitigation/ Countermeasures	Impact (post counter- measure)	Probability (post counter- measure)	RAG Post Mitigation	Risk Owner	Risk Actionee	Risk Status
1	WIL-01	Procurement	There is a risk that suitable alternative accommodation will not be available for services required to vacate the Wilson Hospital site prior to redevelopment.	The site cannot be vacated on time and the commencement of the construction phase is delayed.	Sue Howson	4	3	12		2	24		Room by room survey of Wilson site and development of occupation schedule. Early engagement of NHSPS and tenants to identify accommodation requirements. Identification of options for decant. Development of Decant Strategy and Plan	2	2	8	Matthew Parish	Mike Parker (NHSPS)	OPEN
2	WIL-02	Capability and Capacity	There is a risk that the CCG management reorganisation and move to Local Delivery Units will result in a lack of continuity in leadership and resources will not be available to support the project.	The focus and drive for the project will not be maintained. Timley decision making will be compromised resuting in delays to the project delivery timeline.	Sue Howson	3	3	9		5	45		Early identification of SRO for the project. SRO and Programme Director to establish resourcing requirements.	3	2	30	Andrew McMylor	Andrew McMylor and Sue Howson	CLOSED
3	WIL-03	Design and Plannng	There is a risk that surveys of the site reveal archeology of significant interest.	The scheme is delayed whilst excavations are carried out. This could result in significant delay costs being incurred.	Sue Howson	4	3	12		1	12		Surveys to be carried out to establish extent of archeology. Footprint of proposed building to avoid areas of know archeological interest e.g. manor house. If possible contain building within footprint of exisiting Wilson Hospital.	1	1	1	Matthew Parish	n Matthew Parish	OPEN
4	WIL-04	Design and Planning	There is a risk that full planning permssion will be difficult to achieve due to the conservation area status and opposition from vociferous local groups.	Planning permssion is not received or the process is prolonged leading to significant delays to the project.	Sue Howson	4	3	12		3	36		Early engagement with LBM planners to confirm design constraints on the site. Establish a Community Design Reference Group as part of the design development process. Develop a robust Communication Strategy and Plan to keep the community informed and to offer opportunities for input and	1	2	6	Matthew Parish	Matthew Parish and Sue Howson	OPEN
5	WIL-05	Funding/Financial/Affordability	There is a risk that capital money will not be made available for the initial purchase of furniture and equipment and/or ongoing lifecycle costs.	Facility unable to open on time.	Sue Howson	5	2	10		1	10		Equipment Funding and Procurement Strategy to be agreed as part of stage 1 business case development. Funding source to be identified and funds secured through business case development if required.	1	1	1	Neil MCDowell	CHP	OPEN
6	WIL-06	Strategic and Political	There is a risk that if the expectations of key stakeholders are not aligned to a realistic delivery model for year one of operation that scarce resources are not focussed on what is achievable.	Resources will not be focussed on ensuring that the core wellbeing services have a secured revenue stream and are operational when the health facility becomes operational.		5	2	10		1	10		Clear communication of the vision for the site and the phasing of delivery.	1	1	1	Andrew McMylor	Sue Howson	OPEN
7	WIL-07	Strategic and Political	That the wellbeing aspects of the vision are not given adequate consideration and that the health services are given priority.	The health service facility is delivered without the benefit of the wellbeing services being co-located on site. The full suite of benefits are not realised both financial and non-financial.	Dave Curtis	4	2	8		1	8		Close working relationships between leads and programme management team through regular scheduled meetings and updates	1	1	1	Dagmar Zeuner	Sue Howson	OPEN
8	WIL-08	Funding/Financial/Affordability	There is a risk that the requirement for all land transactions to be conducted on a commercial basis will hinder the delivery of the vision for the Wilson campus.	Voluntary and community services will be unable to afford commercial rates and therefore will decline to locate onto the Wilson site. This could potentially limit the improvements in health and social outcomes envisaged with implementation of the East MertonModel of Health and Well	Dave Curtis	5	3	15		2	30		Reviewing of financial and funding options and getting clarity as early as possible if commercial basis or other offer more akin for success	3	2	12	Dagmar Zeuner	Dave Curtis	OPEN
9	WIL-09	Information Technology	There is a risk that the IT Strategy and Plan for the site is not robust and aligned to the service integration model.	There are interface issues that prevent the implementation of the new health and wellbeing model. Services are unable to share information eletronically with a negative impact on patient/user care. Likely to be a specific challenge with social prescribing.	Dave Curtis	3	4	12		1	12		Early engagement of CSU to secure named project management for the programme. Provide a clear narrative of the service integration model for the site	2	3	6	Sue Howson	Doug Hing	OPEN
10	WIL-10	Communication and Engagement	Mixed messages and inconsistency in timings of messages which could undermine public confidence	Public confidence in our ability to work jointly in partnership and professionally undermined and damaged	Dave Curtis	3	2	6		5	30		MCCG are producing and developing a Comms and engagement plan for the whole Wilson 'Health and Wellbeing' Campus which the Community strategy will be part				Michelle Wallington		OPEN
11	WiL-11	Design and Planning	There is a risk that any proposed residential development proves challenging to achieve planning permission.	The planning permission for the healthcare facility is delayed due to challenge of the application for the residential development.	Sue Howson	3	3	9		2	18		To aim to decouple the planning applications for the healthcare facility and the residential development.	2	2	8	Matthew Parish	Matthew Parish and Sue Howson	OPEN

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12	WIL-12	Communication and Engagement	There is a risk that the CCG expend time and resource defending the strategic decisions of partner organisation where they have limited or no influence on the decision.	Limited resources are diverted from core activities.	Sue Howson	3	5	15		4	60		Development of Communication and Engagement Strategy and Plan. To ensure that communications are clear and transparent with regard to organisational responsibilities. Partner organisations commit resources, either workforce or financial to the communication and	2	3	24	Michelle Wallington	Lucy Ing	OPEN
15		Estates	Risk of not obtaining vacant possession of the site on time.	Delayed commencement of demolition/ construction.	Matthew Parish	4	1	4		2	8		Early engagement with tenants (commenced). Clear understanding of timetable. Clear understanding of rights of tenants. Support relocations where appropriate.	1	1	2	Matthew Parish	Matthew Parish	OPEN