

**NHS 24 - GREEN**

<p><b>NHS 24 BOARD MEETING</b></p>		<p><b>20 JUNE 2019 ITEM NO. XX</b></p>
<p><b>CORPORATE RISK MANAGEMENT UPDATE</b></p>		
<b>Executive Sponsor:</b>	Director of Finance and Performance	
<b>Lead Officer/Author:</b>	Risk and Resilience Manager	
<b>Action Required</b>	The paper is provided to the Board for approval.	
<b>Key Points</b>	<p>Since the last meeting of the Board:</p> <ul style="list-style-type: none"> <li>• The overall risk profile has reduced</li> <li>• 3 risks have reduced since last reporting period.</li> <li>• 1 risk, in relation to phishing or malware attack has increased.</li> <li>• 1 new risk has been identified in relation to the estates strategy and specifically the potential move of the Clyde Contact Centre.</li> <li>• Business risks relate to compliance against data protection and MHRA standards, finance and IT incident response.</li> </ul>	
<b>Financial Implications</b>	Financial risks and mitigation are outlined within the paper below and risk register attached.	
<b>Timing</b>	There are no timing issues with this paper.	
<b>Contribution to NHS 24 strategy</b>	This paper supports the overall strategic objectives of NHS 24 by highlighting the potential risks to achieving the NHS 24 strategy along with supporting mitigation.	
<b>Contribution to the 2020 Vision and National Health and Social Care Delivery Plan (Dec 2016)</b>	The report provides assurance to the NHS 24 Board and its Committees that there is an effective risk management process in place to support delivering the NHS 24 contribution to the Health and Social Care Delivery Plan.	
<b>Equality and Diversity</b>	<p>There are no direct equality and diversity implications associated with this report.</p> <p>The participation and Equalities manager actively participates in risk management process.</p> <p>Further review of the strategic risk register will be required to assess for any impact in relation to equality and diversity.</p>	

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### 1. RECOMMENDATION

1.1 The Board is asked to review and approve the presented risk register and take assurance on the risk management processes and procedures in place.

### 2. RISK MANAGEMENT UPDATE

2.1 The Corporate Risk Register provides an update on the risks to the organisation with a scoring of 10 or greater as at 20 May 2019.

2.2 The Corporate Risk Register was reviewed by the Operational Risk Management Group on 2 May 2019, the EMT Risks and Opportunities Group on 13 May 2019 and the Audit & Risk Committee on 30 May 2019.

2.3 The EMT Risk & Opportunities Group reviewed and refined the mitigation contained within the Strategic Risk Register. This will continue to be developed and presented to the Audit & Risk Committee for review in November before being presented to the Board for approval.

### 3. RISK SUMMARY

3.1 The risk profile is provided below (see figure 1) in the form of a heat map. This is to illustrate the current position of the Corporate Risk Register.

**Figure 1**

		Score	Likelihood					Total	Previous Score
			Rare	Unlikely	Possible	Likely	Almost Certain		
			1	2	3	4	5		
<b>Impact</b>	<b>Extreme</b>	<b>5</b>		<b>1</b> (2)	<b>1</b> (1)	<b>0</b> (0)	<b>0</b> (0)	<b>2</b>	(3)
	<b>Major</b>	<b>4</b>			<b>6</b> (4)	<b>0</b> (0)	<b>0</b> (0)	<b>6</b>	(4)
	<b>Moderate</b>	<b>3</b>				<b>2</b> (3)	<b>1</b> (2)	<b>3</b>	(5)
	<b>Minor</b>	<b>2</b>					<b>0</b> (0)	<b>0</b>	(0)
	<b>Negligible</b>	<b>1</b>							-
<b>Total</b>			-	<b>1</b>	<b>7</b>	<b>2</b>	<b>1</b>	<b>11</b>	
<i>Previous Score</i>			-	(2)	(5)	(3)	(2)		(12)

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### Very High Risks

- 3.2 There are no very high risks on the Corporate Risk Register.

### Reduced Risks

- 3.3 Three risks have reduced in score since the last meeting of the Board:

There is a risk (**RPND/030603**) that the clinical safety and quality of the patient journey could be affected by current limitations in the functionality of the technical system (automation). A cross directorate review of this risk was undertaken to ensure that all technical aspects were fully understood. A workshop took place with a multidisciplinary team to review the current process and at the conclusion, it was agreed that the current process/workaround was working well and would continue. It was therefore agreed that the risk would reduce to a 9 but would remain open.

There is a risk (**RPND/034150**) of reputational damage with the public and key stakeholders if NHS Inform and self-help guides are not available for a prolonged period due to an IT outage. Work has been undertaken with the supplier to update the support and hosting contract to provide a 24/7 support model as a long-term solution. This score has been reduced to an 8.

There is a risk (**RPND/033964**) relating to the uncertainty of Brexit on NHS 24, this has reduced from a score of 12 to a score of 9. This is due to a combination of political decision making that reduces the threat of a no deal exit and NHS 24 having a greater understating of key areas such as staffing profile and supply chain.

### New Risks

- 3.4 One new risk has been created since the last meeting (**RPND/03551**) that NHS 24 do not capitalise on the long term accommodation opportunities for the regional operational centres due to short term lease arrangements. This risk is part of the overall estates strategy for NHS 24.
- 3.5 A risk assessment will be undertaken as part of the options appraisal process for the Clyde Contact Centre. This will consider business, staff, clinical and reputation and engagement risks.

### Increased Risks

- 3.6 One risk has increased. There is a risk (**RPND/025796**) that NHS 24 is vulnerable to a successful phishing or malware attack due to a range of control measures not being fully utilised. This risk has increased from 9 to 12 while NHS 24 considers how the Secure email blueprint controls can be implemented.

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### 4. RISK HIGHLIGHTS BY CATEGORY

- 4.1 Figure 2 below outlines a breakdown of the broad categories of the risks within the Corporate Risk register.

Figure 2

Primary Category	Business	Staff	Clinical	Reputation & Engagement	Total
Current	7	3	1	0	11
Previous	6	3	2	1	12

#### Business Risks

- 4.2 There is a risk (**RPND/033890**) that NHS 24 may not be fully compliant with the MHRA medical devices guidelines within the required timescale of May 2020. Significant engagement has taken place with Greater Glasgow & Clyde and the Regulatory organisation to fully understand the implications of the change in guidelines and a mitigation plan has been developed. This risk will be monitored and reviewed as the mitigation plan is implemented. An update paper in this regard was submitted to the Clinical Governance Committee.
- 4.3 The operational risk (**RPND/028862**) relating to the time and resource required to support the response to P1 incidents continues to be managed by Technology and Service Delivery colleagues. A number of mitigating actions are in progress to manage this risk including revised major incident process. There have been 9 Priority 1 incidents from 01 February 2019 to 24 April 2019. Ongoing monitoring and joint lessons learned will help identify improvement in the overall response.
- 4.4 The financial risk (**RPND/024449**) remains as previously scored. The strategic planning team are currently implementing a bi-monthly SPRA process which includes enhancing controls to support the monitoring of directorate financial performance.

#### Staff Risks

- 4.5 High sickness absence levels (**RPND/021544**) continue to be a risk to NHS 24 performance. Discussion on this risk took place at the Staff Governance Committee and the Area Partnership Forum.

#### Clinical Risks

- 4.6 There a risk (**RPND/032338**) that the quality of the patient journey could be affected in the event that there are inaccuracies in referral centre availability on Knowledge Management System (KMS) that NHS 24 are unable to update in real time. It is anticipated that a solution will be in place by summer 2019.

#### Reputation & Stakeholder Engagement Risks

- 4.7 There are no risks scoring 10 or above.

**5. PROGRAMME RISK**

- 5.1 The Service Transformation Programme Board met on the 18 April 2019 and provided an update to programme level risks. This included reporting an overall amber status for the Modernising Outpatients programme and the In-hours GP Triage (GPT) programme.
- 5.2 The Modernising Outpatients programme key risk relates to the uncertainty on the scope of this work nationally.
- 5.3 The GPT key risk relates to the delay in the timescales for technology development and partner readiness.
- 5.4 The shift review programme undertook a risk review session on 2 May 2019 to review the risks to the programme objectives.