| | |
|---|---|
| **NHS 24**<br>**BOARD MEETING** | **26 AUGUST 2019**<br>**ITEM NO. 8.4** |

**CORPORATE RISK MANAGEMENT UPDATE**

| | |
|---|---|
| **Executive Sponsor:** | Director of Finance and Performance |
| **Lead Officer/Author:** | Head of Risk & Resilience |
| **Action Required** | The paper is provided to the Board for assurance. |
| **Key Points** | Since the Corporate Risk Register (all risks scoring 10 or above) was last presented to the Board:<br>• The overall risk profile has increased from 11 to 13.<br>• 2 new risks have been identified.<br>• 3 risks have increased to 10 or over.<br>• 2 risks have reduced to below 10.<br>• 1 risk has been closed. |
| **Financial Implications** | Financial risks and mitigation are outlined within the paper below and risk register attached. |
| **Timing** | There are no timing issues with this paper. |
| **Contribution to NHS 24 strategy** | This paper supports the overall strategic objectives of NHS 24 by highlighting the potential risks to achieving the NHS 24 strategy/Annual Operating Plan along with supporting mitigation. |
| **Contribution to the 2020 Vision and National Health and Social Care Delivery Plan (Dec 2016)** | 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. |
| **Equality and Diversity** | There are no direct equality and diversity implications associated with this report. |

## 1. RECOMMENDATION

1.1 The Board is asked to review the risks presented, provide feedback and take assurance on the risk management processes and procedures.

## 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 15 August 2019.

2.2 The Corporate Risk Register was reviewed by the EMT Risk & Opportunities Group on 23 July 2019 and the Audit & Risk Committee on 8 August 2019.

## 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**

| Impact | | Score | Likelihood | | | | | Total | *Previous Score* |
|---|---|---|---|---|---|---|---|---|---|
| | | | **Rare** | **Unlikely** | **Possible** | **Likely** | **Almost Certain** | | |
| | | **Score** | **1** | **2** | **3** | **4** | **5** | | |
| | **Extreme** | 5 | | **2** (1) | **1** (1) | **0** (0) | **0** (0) | 3 | *(2)* |
| | **Major** | 4 | | | **8** (6) | **0** (0) | **0** (0) | 8 | *(6)* |
| | **Moderate** | 3 | | | | 1 (2) | 1 (1) | 2 | *(3)* |
| | **Minor** | 2 | | | | | **0** (0) | 0 | *(0)* |
| | **Negligible** | 1 | | | | | | - | - |
| **Total** | | | - | 2 | 9 | 1 | 1 | 13 | |
| *Previous Score* | | | - | *(1)* | *(7)* | *(2)* | *(1)* | | *(11)* |

### Very High Risks

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

### New Risks

Two new risks scoring 10 or above have been recorded since the last meeting of the Board:

3.3 There is a risk (RPND/036117) that the technology components supporting NHS 24's front line application will become more prone to failure and parts to repair, upgrade or patch will become more difficult to source. Components either have reached or are getting close to an end of life position due to a delay in the upgrade of the technology. This risk is owned by the Chief Information Officer and will be monitored by the Planning & Performance Committee.

3.4 There is a risk (RPND/036304) that staff based at Clyde Contact Centre will become disengaged due to the current uncertainty on future base location. This risk was identified by the Director of Workforce and will be monitored by the Staff Governance Committee.

**Increased Risks**

Three risks have increased in score since the last meeting of the Committee:

3.6     There is a risk (RPND/025466) that there is insufficient stakeholder support to drive change and provide a service aligned to our corporate objectives, strategy and implementation timescales.  Responsibility for the stakeholder function has transferred from Finance & Performance to Service Development Directorate.  At the time of transfer, the risk was scored 9 (impact 3 x likelihood 3) and upon review, the Service Development Management Team agreed that the impact if this risk was to materialise was greater and the score increased to 12 (impact 4 x likelihood 3).

3.7     There is a risk (RPND/033964) that short and long-term operational disruptions may occur as a result of EU Exit, challenging NHS 24 in delivering an effective service and delay strategic objectives.  This may challenge NHS 24 in delivering an effective service and delay strategic objectives.  This risk has increased due to the October deadline approaching and the increased threat of a 'no deal' EU Exit.

3.8     There is a risk (RPND/034576) that NHS 24 will not fully optimise their digital response to a pandemic flu due to reliance on stakeholder's operational response model.  This risk has increased due to the timescales taken to achieve the most effective digital response model.

**Reduced Risks**

Two risks have reduced in score since the last meeting of the Committee:

3.10    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.  This risk has reduced from a 12 to an 8 due to the significant progress made in relation to the action plan to mitigate this risk.  This risk is monitored by the Clinical Governance Committee and are kept updated on progress.

3.11    There is a risk (RPND/028862) that the service performance is reduced due to the time and resource required to support our managed service provider to respond to P1 technical incidents.  Following discussion with the Technology Directorate, this risk has reduced from 12 (impact 4 x likelihood 3) to 8 (impact 4 x likelihood 2) due to a number of robust mitigation actions being put in place including a new High Alert Process being put in place and tested, Senior Technology Managers on-call arrangements in place for out of hours to assist any major incident, BT Commercial Director being appointed and an Improvement Plan in place and implemented for Major Incident Management as part of the Contract Stabilisation Programme.

**Closed Risks**

One risk has been closed since the last meeting of the Committee:

3.12    There was a risk (RPND/029405) that the service access level and patient journey could be impacted at peak periods due to clinical staffing capacity. It was agreed at the Service Delivery Risk Review on 18 June that this risk could now be closed as it was being managed through business as usual and was sufficiently mitigated by the test of change business model and the shift review that it had met its target score of 6.

**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 | 2 | 1 | 13 |
| Previous | 7 | 3 | 1 | 0 | 11 |

**5.    PROGRAMME RISK**

5.1    Work continues with the Programme Management Office to improve programme risk management and ensure appropriate and timely escalation to the Corporate Risk Register. The Executive Management Team, through the SPRA process and the Change Portfolio Board will have an overview of all programmes and their associated risks. Where appropriate, they will recommend that a risk be escalated to the NHS 24 Corporate Risk Register.

5.2    Programme Boards will still maintain risk registers, with risks rated for impact and likelihood as they relate to the programme objectives. The current key programme risks on the corporate risk register relate to the shift review implementation, technology refresh and the estates strategy programme.