

**NHS 24  
BOARD MEETING**

**16 JUNE 2022  
ITEM NO 8.2  
FOR ASSURANCE**

**CORPORATE RISK REGISTER UPDATE**

<b>Executive Sponsor:</b>	Medical Director
<b>Lead Officer/Author:</b>	Head of Risk Management and Resilience
<b>Action Required</b>	The paper is provided for review, discussion and assurance.
<b>Key Points for this Committee to consider</b>	<p>The Board is presented with all corporate risks scoring 10 or more.</p> <p>The short period since the corporate risk register was last presented to the Board (28 April 2022), means that the overall risk profile has remained stable.</p> <p>Set out below a number of risks are currently under consideration.</p>
<b>Date presented to EMT and relevant Committee</b>	<p>Before presentation to the Committee, all risks have been reviewed and updated at a directorate level and considered by the following groups:</p> <p>09/05/22: EMT Business Meeting            12/05/22: Staff Governance Committee            16/05/22: Planning &amp; Performance Committee            26/05/22: Clinical Governance Committee            06/06/22: EMT Business Meeting            07/06/22: Audit &amp; Risk Committee</p>
<b>Strategic alignment and link to overarching NHS Scotland priorities and strategies</b>	This paper provides assurance to the Board and that there is an effective risk management process in place to support delivery of the NHS 24 contribution to our Remobilisation Plan and Strategic Intent.
<b>Key Risks</b>	The key risks are outlined in this paper.
<b>Financial Implications</b>	There are no direct financial implications associated with this report. Any financial implications will be highlighted within the risk register attached.
<b>Equality and Diversity</b>	There are no direct equality and diversity (E&D) implications associated with this report. The Participation and Equalities manager actively participates in risk management process.

**1. RECOMMENDATION**

- 1.1 The Board is asked to review the risks presented, provide feedback and take assurance from the risk management process.

**2. RISK MANAGEMENT UPDATE**

- 2.1 The attached Corporate Risk Register provides an update on corporate risks to the organisation scoring 10 and above as at 01 June 2022.
- 2.2 There are 48 corporate risks in total (25 scoring 10 and above and 23 scoring below 10). It has been agreed that each of the Board Committees will be presented annually with an appropriate risk register which contains all risks within their remit to provide complete overview of all risks. This is scheduled for the July/August meetings of the Committees.
- 2.3 Since the short time since the corporate risk register was previously reported to the Board on 28 April 2022, the risk profile has remained stable. A number of risks are currently under review.
- 2.4 Work is ongoing to develop Management information reporting. Work has now commenced to implement an upgraded risk management system which, once implemented, will support development of reporting.
- 2.5 Internal Audit undertook a review of risk management processes during quarter 4 of 2021/22. There were two low rated and one medium rated recommendation identified for improvement, in the context of the significant demands and organisational pressures experienced during this period. The recommendations from the audit will be incorporated into the Risk Maturity Action Plan and progress will be monitored by the EMT Risks & Opportunities Group and the Audit & Risk Committee.

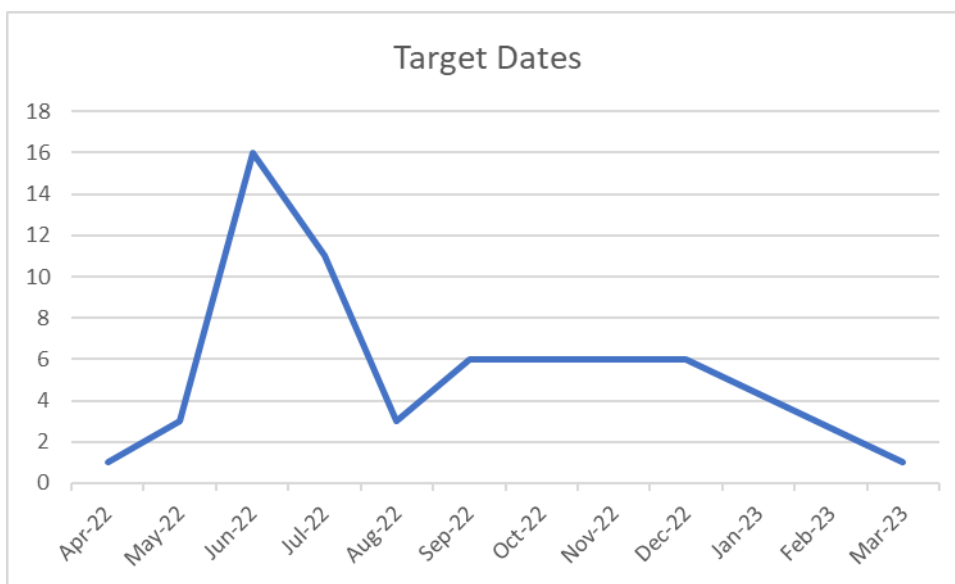
**3. RISK SUMMARY**

- 3.1 The risk profile (figure 1) provided in the form of a heat map below highlights the current position of all planning and performance risks. Previously heat maps only contained risks scoring 10 and above.

**Figure 1. Risk Profile**

		Likelihood					Total	
		Rare	Unlikely	Possible	Likely	Almost Certain		
		Score	1	2	3	4		5
Impact	Extreme	5	-	1 (1)	0 (0)	0 (0)	0 (0)	1
	Major	4	-	6	17 (15)	4 (2)	0 (0)	27
	Moderate	3	-	4	7	3 (1)	0 (0)	14
	Minor	2	-	1	1	4	0 (0)	6
	Negligible	1	-	-	-	-	-	0
Total			-	12	25	11	0	48

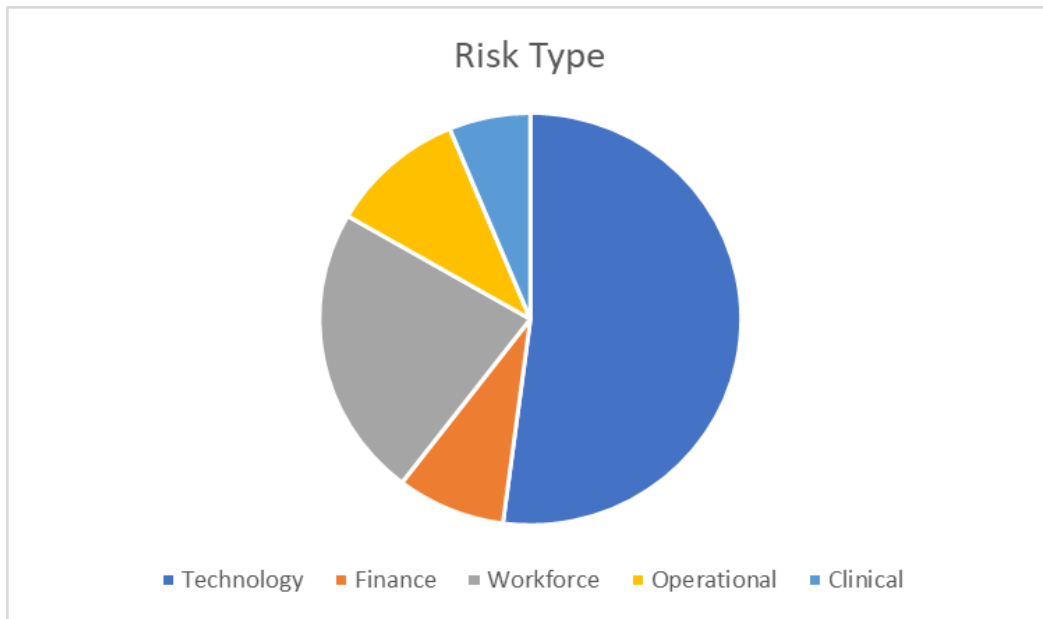
**Figure 2. Target Date**



3.2 Figure 2 risk target dates outline that the current risks will reduce in the next 4 months. This is largely related to the timelines associated with technology and Connect Programme.

3.3 There are currently 3 risks where the target dates have passed, these are currently under review. Only one of these risks score greater than 10 (RPND/042273). A verbal update can be provided at the meeting.

**Figure 3. Areas of Risk**



3.4 Figure 3 reflects the target dates graph with a significant portion of planning and performance risks related to technology and information.

**Reduced Risks**

3.4 Since previously reported, 1 risk has reduced in score as follows:

RPND/038901: There is a risk that gaps in specific skills and capacity across the digital team are impacting the ability to deliver strategic objectives.

This risk relates to NHS 24's ability to recruit and retain quality candidates to recruit into specialist roles. This risk was previously scored high due to the pressures of the pandemic but as we are getting back to BAU there are sufficient controls in place to reduce this risk as this time, including full review of workload and available skillsets, roadmap activity.

**Risks currently under review:**

3.4 It should be noted that the following risks are currently under review:

RPND/037063: There is a risk that the NHS 24 would not be able to sustain a safe and effective response to significant additional pressure/demand on services due to current system and resourcing capacity limitations. This risk is being monitored closely and a reduction in score is being considered. This risk remained high following the decommissioning due to the uncertainty of demand and the Easter period

RPND/043863: There is a risk that, following the decommissioning of the Covid pathway, primary care is unable to meet the needs of the public which increases call demand to NHS 24's 111 service in the out of hours period. In line with the reason stated above, this risk is also being considered for reduction as the data becomes clearer.

**4. PROGRAMME RISK**

- 4.1 A number of programme related risks are reflected on the risk register including Estates, Connect, Frontline Leadership Capacity, and decommissioning of the COVID pathway.

NHS 24 - AMBER - CORPORATE RISK REGISTER (Correct as at 01/06/2022)

BOARD MEETING - 16 JUNE 2022

Case Ref	Receipt Date	Primary Governance Committee	Secondary Governance Committee	Description	Significant Impact	Executive Risk Owner	Strategy Type	Mitigating Action	Prev Score (AxB)	Current Score (AxB)	Target Score (AxB)	Target Date	
1	RPND/043987	24/03/2022	Planning & Performance Committee	Staff Governance Committee	There is a risk that when the [redacted] goes out of support [redacted] This could result in [redacted] NHS 24's ability to create staff schedules and manage resource would be severely impacted.	NHS 24 will lose all support from [redacted] in relation to incident resolution, troubleshooting [redacted] This could result in [redacted] NHS 24's ability to create staff schedules and manage resource would be severely impacted.	Chief Information Officer	Reduce	This will be discuss and actions agreed at the May DTAG Meeting. [redacted] Target completion April 2022 - Complete 2. DTAG has this [redacted] Target completion June 2022 3. Looking at potential short term service wrap - Target completion May 2022 - Complete 4. Full procurement exercise will be carried out in relation to either extension or replace - Target completion June 22 5. [redacted]  Completion of these will reduce likelihood and consequence by 3- Risk becomes 1	16	16 (4x4)	4	30/06/2022
2	RPND/037063	24/10/2019	Planning & Performance Committee	Clinical Governance Committee	There is a risk that the NHS 24 would not be able to sustain a safe and effective response to significant additional pressure/demand on services due to current system and resourcing capacity limitations.	Potential delay in patient care due increased waiting times at peak periods. Impact on performance targets Additional pressure on staff.	Director of Service Delivery	Reduce	<b>Mitigating Actions - Ongoing</b> Clinical recruitment pipeline and recruitment plan in place to meet developing organisational and clinical supervision needs. (Ongoing).  <b>Ongoing Controls</b> Application of the Corporate escalation framework that outlines triggers and actions required to support a sustained corporate response. This is supported and implemented through command and control arrangements within MT and Executive Escalation Group (Ongoing control) SMT work to review NHS 24 priorities and resource required to provide a sustainable plan to support Service Delivery during the winter period (Ongoing) Close liaison (weekly) with Scottish Government and key stakeholders through safe space meetings, sponsor meetings, RUC and COVID pathway meetings to discuss current performance, horizon scanning and opportunities for improvement. (Ongoing Control) Overview by NHS 24 IMT/SMT to ensure cross directorate approach to provide organisational support. (Ongoing Control) Increased utilisation of remote clinical supervision and remote management (Ongoing Control) Weekly recruitment and training overview meetings to monitor and manage process (Ongoing Control)  <b>Mitigating Actions Complete</b> Estate Strategy that meets recruitment/resource requirements through expansion of sites in the West and East of Scotland (Complete). 24/7 Technical on-call support to ensure any system issues are resolved quickly (Complete). Developed Management Team to support expanding workforce and services (Complete) Corporate escalation process to support frontline services, in line with ongoing review of organisational priorities and resource allocation/deployment (Complete) Technical assurance on system stability, flexibility and performance (Complete) Planning and communication for COP 26 (Complete)	16	16 (4x4)	4	01/07/2022
3	RPND/043863	09/03/2022	Clinical Governance Committee	Planning & Performance Committee	There is a risk that, following the decommissioning of the covid pathway, primary care is unable to meet the needs of the public which increases call demand to NHS 24's 111 service in the out of hours period.	Poor patient journey Negative impact on reputation	Director of Service Delivery	Reduce	<b>Mitigating Actions and Controls</b> Robust and Consistent National Communications in place (Ongoing) Ongoing daily intra-day level analysis of call arrival patterns and volumes to help quickly identify any changes to demand and/or volume (Ongoing Control) Changes made to IVR to support the changes in the pathway however a conscious effort to minimise change should the pathway be amended again at short notice (Ongoing) <b>Continued use of NHS Inform to help direct callers to the appropriate service (Ongoing Control)</b>	16	16 (4x4)	8	30/09/2022
4	RPND/038259	09/04/2020	Staff Governance Committee	Clinical Governance Committee	There is a risk that if NHS 24 experiences low levels of staff attendance over a prolonged period of time, this will negatively impact its ability to deliver clinical services and develop new and improved ways of working.	Prolonged waits to access services resulting in poor patient experience and reputational damage. Impacts negatively on staff morale, retention and wellbeing.	Director of Workforce	Reduce	<b>Mitigating Actions - Ongoing</b> Implementation of Attendance Improvement Plan (regular updates on progress being monitored by Staff Governance Committee). Action plan is being reviewed and updated for 2022/23. Key actions: 1. Wellbeing Managers are taking a proactive approach to new isolation guidance which will maximise attendance availability. (Ongoing - March 22) 2. Increased Formal Attendance Meetings to support line managers in managing attendance of their staff, signalling expectations to staff of the importance to attend work. 3. Communications Plan in place to promote a positive culture and help staff to understand implications of high levels of non-attendance at work (Complete - Implementation ongoing March 2022) - Review of communications for 2022/23 - TO BE INCLUDED IN PLAN 4. Health & Wellbeing initiatives for staff to support by providing positive working environment, occupational health services and one to one support (Ongoing control). 5. Workplace Adjustment Policy in partnership with Business Disability Forum progressing recommendations (March 2022) 6. Phase 2 of Shift Review would align managers with teams to provide a more supportive and team working environment (Ongoing - 31 July 2022) 7. Continued promotion of LFT and PCR testing and vaccination programme with 90% of staff double vaccinated. 8. Ongoing Audit to be undertaken by Internal Audit of Attendance Management Processes (Ongoing - 31 March 2022)  <b>Mitigating Actions - Complete</b> 1. Health & Wellbeing Strategy and Framework in place. (Complete) - Plan under review for 2022/23 2. Improved sickness absence reporting suite with improved access for managers (Complete). 3. Attendance at training and/or completion of eLearning modules by managers is monitored and a fortnightly report is published to show compliance and progress (Complete). Further plan of support and learning to be put in place for line managers, currently being developed with Wellbeing Team Managers. 4. Levelling sessions now in place and running on a regular basis to ensure auditing short and long term sickness absence bringing lessons learnt into raining/feedback sessions (Complete). 5. Infection control policy and measures in place (Complete) 6. Wellbeing Team Managers in place to drive progress in relation to improvement plan and ensure a positive and consistent approach to attendance management (Complete). Review of role and measurement of role on attendance management being developed. 7. Development of Workplace Adjustment Policy in partnership with Business Disability Forum (Complete)	16	16 (4x4)	8	31/03/2023
5	RPND/043988	24/03/2022	Planning & Performance Committee	Staff Governance Committee	BT do not [redacted]	If NHS 24 Telephony Infrastructure Team [redacted]	Chief Information Officer	Reduce	1. Agree a support model and SLA's with BT - Target completion April May 2022 (L) 2. [redacted] for BT to support - Target completion May June 2022 (L) 3. Handover of knowledge from NHS 24 voice specialists to BT - Target completion date May June 2022 (C)  Completion of these will reduce likelihood by 1.3 and consequence by 3.1- Risk becomes 2	12	12	2	30/06/2022
6	RPND/042278	29/09/2021	Planning & Performance Committee	Audit & Risk Committee	[redacted]	Any incidents relating to [redacted] could face prolonged delays in resolution [redacted]	Chief Information Officer	Eliminate	1. Engage with BT for a support model process for initial period of 12months until we have agreed future state [redacted] May 2022 1b) 2. Identify which activities can be undertaken by NHS 24 - [redacted] Job specification completed and awaiting evaluation - Target completion March 2022 - COMPLETE (HR are now carrying out the Job Evaluation) (C) RO: Architecture /Operations / CIO  [redacted] CIO currently drafting Job Description for [redacted] Technical Resource [redacted] Reviewing where Primary & Secondary Role Resilience within [redacted] Operations Team can support and identify appropriate training needs. (L)  [redacted]	12	12 (4x3)	1	30/06/2022



7	RPND/0 42273	28/09/2021	Planning & Performance Committee	Audit & Risk Committee	There is a risk that [redacted] are susceptible to an external [redacted]	This would result in a significant availability issue to services [redacted]	Chief Information Officer	Retain	[redacted]	12	12 (4x3)	6	31/05/2022
8	RPND/0 41489	02/07/2021	Planning & Performance Committee	Audit & Risk Committee	Digital Services Resilience: There is a risk to the availability and integrity of the digital services provided by NHS 24 such as NHS Inform, Care Information Scotland, Breathing Space etc. [redacted]	The impact of this risk could result in: 1) Adverse publicity and reputational damage to NHS 24 from any extended downtime for these services 2) Patient safety by following incorrect advice on altered Self Help Guides	Chief Information Officer	Reduce	1) Consider migration [redacted]	12	12 (4x3)	4	30/06/2022
9	RPND/0 37596	07/01/2020	Planning & Performance Committee	Audit & Risk Committee	There is a risk that malware is introduced from the Internet to the NHS 24 estate via web browsing or email activities from any desktop, laptop or server asset	Possibility of significant cyber incident resulting in reduced ability to deliver 111 services and/or integrity and loss of confidentiality of sensitive data	Chief Information Officer	Reduce	[redacted]	12	12 (4x3)	8	30/09/2022
10	RPND/0 37593	07/01/2020	Planning & Performance Committee	Audit & Risk Committee	[redacted]	[redacted]	Chief Information Officer	Reduce	[redacted]	12	12 (4x3)	8	30/09/2022
11	RPND/0 37590	07/01/2020	Planning & Performance Committee	Audit & Risk Committee	[redacted]	[redacted]	Chief Information Officer	Retain	[redacted]	12	12 (4x3)	4	30/06/2022
12	RPND/0 41263	07/06/2021	Planning & Performance Committee	Audit & Risk Committee	There is a risk that NHS 24 Corporate devices may be compromised through vulnerabilities in home networks and home devices.	Unmanaged therefore perhaps potentially insecure home devices and network may result in an NHS 24 corporate device being compromised which then allows for malicious content to be introduced to NHS 24 estate. This may compromise the integrity, confidentiality and/or availability of the information and services resulting in significant impact to service delivery.	Chief Information Officer	Retain	[redacted] Complete	12	12 (4x3)	8	30/09/2022
13	RPND/0 37567	06/01/2020	Planning & Performance Committee	Audit & Risk Committee	There is a risk that malware is introduced to the NHS 24 estate [redacted]	[redacted]	Chief Information Officer	Reduce	[redacted]	12	12 (4x3)	8	30/09/2022
14	RPND/0 43294	11/01/2022	Planning & Performance Committee	Audit & Risk Committee	[redacted] here is a risk that NHS 24 information [redacted]	[redacted]	Chief Information Officer	Reduce	[redacted] End May 2022 [redacted] End May 2022 [redacted] June 2022	12	12 (4x3)	4	30/06/2022
15	RPND/0 41506	04/07/2021	Staff Governance Committee	Clinical Governance Committee	There is a risk that the benefits of the initial phase of the shift review are not fully realised without the successful deployment of the next phase (managers/dentists/pharmacists).	Challenging performance and workforce planning which negatively impacts ability to provide a sustainable service. Limits ability of NHS 24 to deliver desired outcomes from strategic delivery plan. Increased cultural issues associated with lack of teaming approach on front-line.	Director of Service Delivery	Reduce	<b>Mitigating actions and controls - Ongoing</b> Engagement Sessions with staff are currently ongoing (Ongoing in line with Communications Strategy) Robust modelling in place to establish requirements, focusing on operational and managerial roles. (Ongoing Control) Project documentation developed for Stages 1(Managers) and 2 (Dentists/Pharmacists) including P D (Development Ongoing – target date for Stage 1 31 July 2022, target date for Stage 2 tbc)  <b>Mitigating Actions Complete</b> Staff Engagement / Communications Strategy in place (Complete). Re-establishment of Shift Review Working Group with appropriate representation. (Complete – meeting weekly) Establish a Shift Review Governance Group (Complete – meeting fortnightly) Robust review and assessment of performance/Management Information data to ensure full understanding of organisational requirements (Complete). Shift Review Survey (Complete) External Focus Groups (Complete)	12	12 (4x3)	4	31/07/2022
16	RPND/0 43660	18/02/2022	Clinical Governance Committee	Planning & Performance Committee	There is a risk that due to predicted limited dentistry recovery in the community and resulting public health consequences, there is consequential increased complexity of presenting symptoms to the Scottish Emergency Dental Service (SEDS) in NHS 24.	Increased service demand and clinical complexity leads to increase in average handling time in SEDS service. This in turn, impacts on volumes of subsequent referral to Board Out of Hours Dental Service where resource has remained static despite significantly increased demand over the past 2 years.	Director of Service Delivery	Reduce	<b>Mitigating Actions - Ongoing</b> Ongoing integration of general dentist practitioners to expand expertise during covid pandemic to support more clinically complex and high risk presentations using video consulting has increased safety of patients (Ongoing - tbc).	12	12 (3x4)	3	31/08/2022
17	RPND/0 43659	18/02/2022	Clinical Governance Committee	Planning & Performance Committee	There is a risk, that if NHS 24 do not retain dentists in the Scottish Emergency Dental Service (SEDS), it limits SEDS ability to appropriately refer complex cases in a safe and timely manner (current dentists contracts due to end June 2022).	Without the dentists, a return to historical higher referral rate to Emergency Departments rather than improved direct referral to Oral and Maxillofacial Services which is enabled by the increased expertise of the dentist	Director of Service Delivery	Reduce	<b>Mitigating Actions and Controls - Ongoing</b> Promoted by NHS 24's Head of Dentistry at the Scottish Government Directors of Dentistry meeting, as an opportunity to continue the SEDS service to deliver and support sustainable, safe clinical triage for whole system resilience (Ongoing). A paper is being produced for Scottish Government Sponsor team in pursuit of recurring funding for this service when Covid funding ceases (Ongoing - tbc). Extension to current GDP contracts funded via Advance Clinical Support and RUC budget (Ongoing control). Ongoing regular 1-2-1 meetings with Health Board Out of Hours Dental Services and clinical leads to align and support demand management with local capacity challenges (Ongoing Control)	12	12 (4x3)	4	31/08/2022
18	RPND/0 39878	29/12/2020	Clinical Governance Committee	Planning & Performance Committee	There is a risk that NHS 24's Public Protection Team are unable to maintain and discharge all public protection responsibilities due to current resources not meeting demand and the expected further increase in demand as services expand with expected recruitment.	Not all the necessary and relevant information available at NHS 24 will be shared with the agencies/partners potentially putting vulnerable children and adults at risk. Reputational risk should NHS 24 be unable to discharge all public protection duties. NHS 24 at the moment is viewed by partner agencies as an organisation that delivers against their core requirement and adds real value to the wider Public Protection whole system approach	Director of Nursing & Care	Reduce	<b>Mitigating Actions - Ongoing</b> Business case for additional resources objectively reflecting the additional demand in train for tabling at EMT (Ongoing) Recruitment of additional resource (Ongoing - 31 June 2022)  <b>Ongoing Controls</b> Daily review and assessment of workload (Ongoing Control) Nurse resource supporting administration processes (Ongoing Control) Ongoing review across organisation to identify any available resource for a short term period (Ongoing Control)  <b>Mitigating Actions - Complete</b> Public Protection Team have prioritised existing resources on referral management (3 0 WTE Band 7 Nurses) / 2 8 WTE Band 4 Administrators (Complete) Public Protection Processes have been reviewed to ensure maximum efficiency (complete) Additional hours sanctioned to give surge capacity (complete)	12	12 (3x4)	3	29/07/2022

19	RPND/044131	11/04/2022	Staff Governance Committee	Planning & Performance Committee	There is a risk that without a change to national guidance NHS 24 are unable to effectively manage staff absence related to covid-19.	Negative impact on staff morale, staff retention and wellbeing. Staff absence leads to prolonged wait times to access services resulting in poor patient experience and reputational damage	Director of Workforce	Eliminate	<b>Mitigating Actions and Controls - Ongoing</b> Managers currently managing Covid-19 Special leave in line with the principles of the Attendance Management Policy. (Ongoing control) Long Covid Questionnaire and Guidance in Place to ensure appropriate support in place for staff (Ongoing - tbc). Continue to raise awareness at all appropriate national forums (Ongoing Control)	12	12 (3x4)	1	30/06/2022
20	RPND/038255	09/04/2020	Staff Governance Committee	Planning & Performance Committee	There is a risk that NHS 24 are unable to fully support all health and wellbeing needs of staff due to pace and scale of change and growth of the organisation.	Staff feel unsupported and sickness absence rates increase as a result. Recruitment and retention of staff negatively impacted. Increased management time spent on sickness absence management, removing from other management responsibilities	Director of Workforce	Reduce	<b>Mitigating Actions - Ongoing</b> 1. Retention Recover Plan (Ongoing - tbc) 2. Implementation of the Wellbeing Strategy, Framework and action plan developed to support staff across a number of areas including: 3. Undertaking a review of Occupational Health Service (March 2022) 4. Promotion of training and resilience (March 2022) - Develop wellbeing communications plan/wellbeing hub on intranet (Complete - actions being progressed March 22). Updated and review actions for 2022/23 as part of Wellbeing Plan. 5. Establishment of measure to assess impact of wellbeing initiatives on workforce (Ongoing - March 2022) - Part of review of Wellbeing Plan for 2022/23 6. promotion of wellbeing initiatives (Ongoing Control) - ongoing as part of 2022/23 Healthy Working Lives Plan and review of Wellbeing Action Plan. 7. Working to embed a healthy working environment that relates to all aspects of our staff's lives (Ongoing Control). Progress being closely monitored by Staff Governance Committee. 8. Review of use of Thrive app to be undertaken at the end of March 2022. <b>Mitigating Actions - Complete</b> 1. Staff wellbeing work stream in place. A group is established to support the management/co-ordination of activity. 2. Outputs feed into the IMT/PIP (Complete). 3. Staff wellbeing been incorporated into the Health, Safety & Wellbeing Committee (Complete) 4. Launch of new Wellbeing 'Thrive' App (Feb 2022) (Complete)	12	12 (4x3)	6	31/07/2022
21	RPND/041567	08/07/2021	Staff Governance Committee	Planning & Performance Committee	There is a risk that the rapid growth of NHS 24's front facing operational function outpaces the growth in corporate service functions which are required to support it.	Corporate functions which support operational delivery become overwhelmed and error rates increase. Corporate staff become demotivated and sickness absence increases Corporate staff are not able to keep pace with demand for essential management training of managers and staffs confidence in our leaders is diminished as a result No capacity within corporate service functions to expand and build skillset toward Omni competence to ensure resilience in their service delivery	Director of Workforce	Reduce	<b>Mitigation - Ongoing</b> 1. Establishment Control process and panel approved by EMT in February 22. Group to meet by end of March 2022. 2. Workforce Directorate review of structures (Ongoing - 31 Mar 22) 3. Director level portfolio function review (Ongoing - 31 August 2022) 4. Development of future workforce plan by the Strategic Workforce Planning Group to provide clarification of organisational requirements ensuring right people with the right skills are in the right place at the right time (Ongoing - 31 August 2022) 5. Development of an operational workforce planning group – established Nov 21 with a 6 month work plan (Ongoing - May 2022, now extended to June 2022.) 6. Established the group however stood down at present to allow focus by Service Delivery on festive/winter. 7. Extension of temporary resources with Workforce to support two key areas of risk which now equates to 7 Agency / Fixed Term staff to support volume recruitment and attendance management (Ongoing – June 22) <b>Mitigation - Complete</b> 1. Strategic Workforce Planning Group established and meets bi monthly; monitoring will uncover gaps (Complete) 2. UK Benchmarking of OD, Leadership & Learning to understand best practice and to identify staff to customer ratios (Complete - scheduled for publication 30 Sept 21) 3. Finance agreed budget availability for resource to support (temp/agency/perm) (Complete). 4. Bid submitted to Scottish Government to support resourcing (Submission date 03/09/2021). 5. ICT Restructure (Complete - 31 December 2021) 6. Interim Agile working policy approved Dec 21 to empower employees to work agilely, where appropriate in the context of business needs (Complete). 7. Skills and competency mapping across organisation to understand the gaps (Complete)	12	12 (4x3)	6	30/09/2022
22	RPND/043970	22/03/2022	Staff Governance Committee	Planning & Performance Committee	There is a risk that non frontline staff are anxious and do not have a clear sense of belonging due to the current uncertainty in relation to a potential return to the office/hybrid working model following a long period of predominately homeworking.	Low morale, decreased productivity. Increased attrition/sickness absence Ability to recruit impacted by offerings from other organisations for remote working/based anywhere in Scotland/UK. Negative impact on work life balance	Director of Workforce	Reduce	<b>Mitigating Actions - Ongoing</b> Once for Scotland national flexible working location in development (Sept 2022) Digital desk booking system being procured (June 2022) Support from line manager, EAP, Occ Health (Ongoing Control) Wellbeing Group and Strategy in place (Ongoing Control) Wellbeing resources on intranet (Ongoing Control) Support from line manager, EAP, Occ Health (Ongoing Control) Mitigating <b>Actions - Complete</b> Agile working group and policies in place (Complete Feb 22) Dedicated intranet page for agile working (Complete Feb 22) Survey to all staff (anonymised) to determine preferences for return in terms of no of days location seating (Completed March 22)	12	12 (4x3)	8	30/12/2022
23	RPND/043861	09/03/2022	Staff Governance Committee	Clinical Governance Committee	There is a risk that NHS 24 does not make progress quickly enough, as pandemic measures are stood down, in relation to improving completion rates of statutory/mandatory training and the re-introduction of structured CPD opportunities.	Knowledge/skills gap created impacts role performance, potentially impacting patient safety. Staff wellbeing is impacted as feeling vulnerable, due to not having right tools/skills to undertake role competently. Staff who do not feel they are being developed personally are more likely to leave, impacting our attrition rates. Reputational damage if staff not trained to a certain standard.	Director of Workforce	Reduce	<b>Mitigating Actions - Ongoing</b> 2. Conduct an organisational review of training structures and content. (SEPT 22) 3. Explore most effective structures for administering and delivering training. (NOV 22) 4. Devise an easily accessible Prospectus. (NOV 22) 5. Devise approach to aligning CPD protected learning time to new approach to training (including mandatory) and CPD. (NOV 22) 6. Review and refresh Corporate Induction. (NOV 22) 7. Publish Training Calendar. (DEC 22) <b>Mitigating Actions - Complete</b> 1. Formation of a Training Project Team and a Training Project plan. (COMPLETE)	12	12 (4x3)	8	30/12/2022
24	RPND/042971	02/12/2021	Planning & Performance Committee	Audit Committee	There is a risk that due to the high degree of financial uncertainty at a national level, NHS 24 do not receive the 2022/23 funding settlement (or funding decisions delayed into the new financial year) required to deliver on its strategic objectives.	NHS 24 will not be able to deliver on all its strategic objectives. Strategic planning will be negatively impacted or delayed.	Director of Finance	Reduce	<b>Mitigating Actions - Ongoing</b> Submission of financial plans to Scottish Government (Complete), supported with ongoing dialogue to confirm NHS 24 and Scottish Government's agreement on planning assumptions (Ongoing) Confirmation of breakdown of NHS 24's allocation (Ongoing ) <b>Mitigating Actions - Complete</b> Secured recurrent funding in place for mental health (Complete) <b>Ongoing Controls</b> SPRA process in place to enable prioritisation for use of funding to ensure balanced budget (Ongoing Control) RMP4 and SPRA as a vehicle for getting commitment for funding of strategic priorities (Ongoing Control) Continued engagement and representation at the appropriate forums to influence/inform decision making in relation to urgent care, mental health, health and social care priorities etc are (Ongoing Control) Continued monitoring of performance and governance processes in place to evaluate and enable quick decisions if the funding landscape changes (Ongoing Control)	12	12 (4x3)	8	30/06/2022
25	RPND/041505	04/07/2021	Planning & Performance Committee	Clinical Governance Committee	There is a risk that the combined implementation of Connect Programme phase 1c and [redacted] impacts on delivery of NHS 24 clinical services due to the amount and timing of system 'down time'.	Compromised ability to deliver services - unable to answer calls from the public during downtime. No flexibility to appropriately resource due to the schedule/plan not being aligned to resource planning	Chief Information Officer	Reduce	1. Fixed Schedule Plan for system changes/downtime in line with resource planning (Minimising downtime max service availability) (Ongoing - Phase 1a and b by December 2021 and Phase c by March 2022) (acknowledging dependency on supplier) Complete / Ongoing controls 2. Review/Health check and Recovery Plan for Connect Programme (Complete). 3. Clear communications plan in place for internal/stakeholder comms. Weekly planning meetings in place (Ongoing) 4. Programme Governance Framework in place with service delivery representation to provide ongoing scrutiny of programme design and delivery (Ongoing control) 5. Weekly joint meeting with ICT Ops/Connect Programme and Service Delivery to review downtime schedule and proposed schedule (In Place) to provide assurance from IT/PMO colleagues in relation to plans/processes in place. Ongoing 6. Testing of user experience prior to implementation of changes incorporated into project plans. (Complete) Implementation (Ongoing control) 7. Increase in frontline staff numbers to counter the reduced performance times (Dec 2021 then pipeline thereafter) NON ICT RISK <b>Completion of these will reduce C by 2 &amp; I by 3 - Risk becomes retained</b>	10	10 (5x2)	5	30/06/2022