NHS 24 - OFFICIAL - CORPORATE RISK REGISTER (Correct as at 21/11/2022)

NHS 24 Board Meeting - 8 December 2022

	Case Ref	Receipt Date	Primary Committee	Secondary Committee	Description	Significant Impact	Executive Risk Owner	Strategy Type	Mitigating Action	Prev Score (AxB)	Current Score (AxB)	Target Score (AxB)	Target Date
1	RPND/0 38259	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, meet the duty outlined in the Health and Care Staffing Act (Scotland) (2019) to ensure appropriate staffing 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	**Mitigating Actions - Ongoing** Implementation of Attendance Improvement Plan (regular updates being monitored by Staff Governance Committee). Action plan is being reviewed and updated for 2022/23. Key actions: 1. Undertake Workplace Adjustment Policy Workshops and integrate within the Management Essentials Programme from 2023 (Ongoing - Jan 2023) 2. Phase 2 of Shift Review would align managers with teams to provide a more supportive and team working environment (Ongoing - 31 March 2023) 3. Wellbeing Managers will continue and recruitment underway for an addition 1 x WTE at Dundee Centre by March 2023 (Ongoing - 31 March 2023). **Ongoing Controls** 1. COVID Special Leave ended August 2022. We will continue to be proactive due to more relaxed PC Controls (Ongoing Control). 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 (Ongoing Control). 3. Health & Wellbeing initiatives for staff to support by providing positive working environment, occupational health services and one to one support (Ongoing control). **Mitigating Actions - Complete** 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 training/feedback sessions (Complete). 5. 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. 6. Development of Workplace Adjustment Policy in partnership with Business Disability Forum (Complete). 7. Wellbeing Managers are taking a proactive approach to new isolation guidance which will maximise attendance availability. (Ongoing - March 22) COMPLETE 8. All Directors and Managers to have attendance targets as an objective within their Appraisal (Complete). 9 Manager Dashboards to be rolled out from July to ensure accountability (Complete). 10. Audit to be undertaken by Internal Audit of Attendance Management Processes (Complete - 31 March 2022) - Audit now complete and recommendations and actions shared with Audit Committe, EMT & SMT.	16	16 (4x4)	8	31/03/2023
2	RPND/0 41923	16/08/2021	Planning & Performance Committee	Audit & Risk Committee	This is a risk that key milestones for Change Portfolio endorsed projects and programmes will not be delivered due capacity and recruitment issues within the PMO and at key points across the organisation	Organisational priorities are not delivered on time. Impacts ability to adapt to current and new work and changing priorities. Benefits are not obtained as planned or anticipated. Key dependencies are missed or not fully understood.	Director of Transformation, Strategy, Planning & Performance	Reduce	**Mitigating Actions Ongoing** Development of NHS 24 Strategy and Annual Delivery Plan will identify key areas for development and potential demands on future PMO resource (Ongoing - tbc) Recruitment of project managers to fill current vacancies is underway (Ongoing - April 2023) **Ongoing Controls** Appropriate project control documentation developed as appropriate providing clear dependencies, deliverables and plans (Ongoing) Portfolio level view of dependencies developed and discussed on a weekly basis with issues escalated to EMT where required (weekly - ongoing). Management of project / programme resources through PMO with appropriate escalation to SROs where needed ensures resources are prioritised as required (Ongoing control) Fortnightly PMO meetings ensures dependencies across the Portfolio are identified and managed (Ongoing control) Weekly Cross Programme Dependency meeting in place to manage and monitor Estates & Connect dependencies (Ongoing control) Agreed governance structure from project to programme board to portfolio board supporting project teams and SROs address resource or skills gaps (Ongoing control). Programme Highlight Reports reviewed regularly by Head of PMO and Director and then reviewed quarterly by EMT (Ongoing control). Training and development of existing team ongoing to internally grow suitable project resource (Ongoing) New programme manager post in place to provide additional management support to the team (Ongoing). **Mitigating Actions Complete** Review/health check undertaken to identify gaps/additional support requirements to deliver the Connect Programme, including full consideration been given to all possible recruitment avenues to secure sufficient resource to deliver as planned, including secondments, agency recruitment and temporary and full time post requirements. (Complete) Tender exercise undertaken to identify appropriate resource to fill resource/skills gaps identified (Complete) Additional resources identified to support the Connect programme from Resulting IT Consulting Company to ease the pressure on PMO and provide sufficient capacity for project documentation particularly dependencies to be identified and appropriate action taken (Complete - in place since December 21). Temporary Estates Programme Manager post identified and in post to provide additional support (Complete) Tender exercise Complete to appoint appropriate external resource to provide independent check and challenge, expertise and experience to undertake phase 2 of the Connect programme (Complete).	12	12 (3x4)	9	31/03/2023
3	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	**Mitigating actions and controls - Ongoing** 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) Manager implementation (Ongoing - February 2023) **Mitigating Actions Complete** 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) Project documentation developed for Stages 1(Managers) and 2 (Dentists/Pharmacists) including PID (Complete)	12	12 (4x3)	4	31/03/2022
4	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	████████████████████████████	12	12 (4x3)	8	31/12/2022
5	RPND/0 37590	07/01/2020	Planning & Performance Committee	Audit & Risk Committee	██████████████	██████████	Chief Information Officer	Retain	████████████████████████████	12	12 (4x3)	4	31/12/2022
6	RPND/0 44024	29/03/2022	Planning & Performance Committee	Staff Governance Committee	There is a risk when the staffing requirement is known (following scoping of phase 2 of the shift review), there will be a gap between the current workforce and the actual number required and that gap will be unaffordable.	NHS 24 do not have the budget to employ the full requirement of staff. Benefits of shift review not utilised.	Director of Service Delivery	Reduce	**Mitigating Actions and Controls - Ongoing** Clarification from Scotland Government on recurring frontline allocation (Ongoing - December 2022) Early engagement with finance team (Ongoing Control) **Mitigating Actions - Complete** Development and Approval of Outline Business Case/Options Paper (Complete - August 2022) Phased implementation plan of preferred option in place (Complete - August 2022)	12	12 (4x3)	4	30/12/2022

#	ID	Date	Committee	Committee	Risk	Impact	Owner	Treatment	Mitigating Actions					Date
7	RPND/0 42971	02/12/2021	Planning & Performance Committee	Audit & Risk 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	**Mitigating Actions - Ongoing** 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) Secured partial recurrent funding in place for mental health and provided AfC figures to SG Sponsor (Ongoing for 22/23) **Ongoing Controls** SPRA process in place to enable prioritisation for use of funding to ensure balanced budget (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) SMT to monitor all start and end dates for potential projects to ensure no slippage occurs into the next financial year (Ongoing Control)	12	12 (4x3)	↔	8	31/12/2023
8	RPND/0 44632	21/06/2022	Staff Governance Committee	Clinical Governance Committee	There is a risk that public Sector, in particular NHS, industrial action may disrupt the provision of services.	Dependent on the scale of industrial action this may cause disruption to frontline and corporate services.	Director of Workforce	Reduce	**Mitigating Actions Complete** Establishment of Industrial Action Short Life Working Group (Complete) **Mitigating Actions Ongoing** Engage with senior managers to start preparations in partnership (Ongoing). Criticality matrix to determine service impact and prioritisation (ongoing). Engage with SG EPRR and workforce directorates to determine a set of planning assumptions. (Ongoing date tbc) Review industrial action policies and guidance (Ongoing 21/11/2022.) Review business impact assessment with each directorate (ongoing 21/11/22) Review potential performance impact based on previous experience (Ongoing) Consider impact in terms of TU membership within NHS24 (Complete as far as possible).	12	12 (4x3)	↔	9	30/12/2022
9	RPND/0 37063	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	**Mitigating Actions - Ongoing** Recruitment plan for both clinical and non-clinical roles in place to meet developing organisational and clinical supervision needs. (Ongoing). Review of operational model and ways of working for dentistry and Pharmacy Services including a review of IVR messaging and appropriate signposting to NHSInform (Ongoing) Test of Change to review and improve clinical talk times (Ongoing) **Ongoing Controls** 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 arrnagements within IMT and Executive Escalation Group when appropriate (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 COV D 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) **Mitigating Actions Complete** 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)	12	12 (4x3)	↔	4	31/03/2023
10	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 via ▇	▇	Chief Information Officer	Reduce	▇	12	12 (4x3)	↔	4	31/01/2023
11	RPND/0 43294	11/01/2022	Planning & Performance Committee	Audit & Risk Committee	▇ there ▇ is a risk that ▇	▇	Chief Information Officer	Reduce	▇	12	12 (4x3)	↔	4	31/01/2023
12	RPND/0 44664	24/06/2022	Planning & Performance Committee	Audit & Risk Committee	There is a risk that websites we link from our digital products/services may not be credible, secure or resilient	Website visitors may be exposed to misinformation or cyber threats by clicking through to websites which appear to be quality assured (linked to from an NHS product/service). The organisation may be at risk of negative publicity/sentiment if citizens are impacted by referral to websites which aren't quality controlled. ▇	Chief Information Officer	Eliminate	Sites we link to do always show quality assurance. Picked up as part of ▇ under quality assurance. RO: Change Delivery We will include a QA automation requirement ▇ ▇ we will request a report from either the current supplier, or implementation partner, showing all external links and the status of these ▇	10	10 (2x5)	↔	1	31/12/2022