

NHS 24 - AMBER - CORPORATE RISK REGISTER (Correct as at 05/10/2022)

BOARD MEETING - 20 OCTOBER 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/038259	06/04/2020	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	<p>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).</p> <p>Ongoing Controls 1. COVID Special Leave ended August 2022. We will continue to be proactive due to more relaxed IPC 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).</p> <p>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 raining/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 Committee, EMT & SMT.</p>	16	16 (4x4)	8	31/03/2023
2	RPND/043987	24/03/2022	Planning & Performance Committee	Staff Governance Committee	There is a risk that when the goes out of support in relation to incident resolution, troubleshooting in relation to incident resolution, troubleshooting in relation to incident resolution. This could result in NHS 24's ability to create staff schedules and manage resource would be severely impacted.	NHS 24 will lose all support from in relation to incident resolution, troubleshooting in relation to incident resolution. This could result in NHS 24's ability to create staff schedules and manage resource would be severely impacted.	Chief Information Officer	Reduce	<p>2. DTAG has this Target completion April 2022 COMPLETE 3. Looking at potential short term service wrap - Target completion June 2022 COMPLETE 4. Full procurement exercise will be carried out in relation to either extension or replace - (Requirements captured and complete) SAS procurement tender underway - Target completion March 23</p> <p>Completion of these will reduce likelihood and consequence by 3- Risk becomes 1</p>	16	16 (4x4)	1	31/03/2023
3	RPND/036117	24/08/2019	Planning & Performance Committee	Clinical Governance Committee	There is a risk 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 resource.	Increases potential system downtime impacting on the delivery of NHS 24's front line services. Significant negative impact on public, partner and staff relations.	Chief Information Officer	Reduce	<p>Implementation of the Connect programme will address the key technology risks facing the organisation as well introducing new digital capability to transform how we work as an organisation as follows: Phase 1b: RO: Operations 7) WAN/LAN updates: COMPLETE RO: Change Delivery 8) Desktop roll-out: Key milestone end January 2022 COMPLETE 9) Laptop rollout - Key milestone March 2022 COMPLETE RO Architecture 14) Laptop rollout - Key milestone March 2022 COMPLETE 15) rollout Target March 2022 COMPLETE 16) Key milestone September 2022 Completion of these will reduce C&L by score of 1 - Target C2 L2 Phase 1c: RO: Change Delivery 11) Greater March 2022 go live due to delay in Connect Programme rebased to September 22 RO: Operations / Change Delivery 12) Implementation of new infrastructure September 2022 RO: Clinical Systems Development 10) will migrate to new Data Centre by February 2022 COMPLETE 13) January 2022 with dual running until March 2022 COMPLETE Completion of these will reduce C&L by 1 - Target C1 L1</p>	16	16 (4x4)	4	31/01/2022
4	RPND/042278	29/09/2021	Planning & Performance Committee	Audit & Risk Committee	Any incidents relating to in resolution could face prolonged delays	Any incidents relating to in resolution could face prolonged delays	Chief Information Officer	Eliminate	<p>RO: Operations 1. Engage with BT for a support model process for initial period of 12months until we have agreed future state 2. Identify which activities can be undertaken by NHS 24 - Job specification completed and awaiting evaluation - Target completion March 2022 - COMPLETE (HR are now carrying out the Job Evaluation) (C) COMPLETE RO: Operations / CIO CIO currently drafting Job Description for Technical Resource - COMPLETE Reviewing where Primary & Secondary Role Resilience within Operations Team can support and identify appropriate training needs. (L) Target completion: December 2022</p> <p>Completion of these will reduce C by 3 & L by 2</p>	12	12 (4x3)	1	31/12/2022
5	RPND/044024	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	<p>Development and Approval of Outline Business Case/Options Paper (August 2022 Complete) Phased implementation plan of preferred option in place (August 2022) Clarification from Scotland Government on recurring frontline allocation (Ongoing - October 2022) Early engagement with finance team (Ongoing Control)</p>	16	12 (4x3)	4	30/12/2022
6	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	<p>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)</p> <p>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 arrangements 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 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)</p> <p>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)</p>	12	12 (4x3)	4	31/03/2023

7	RPND/ 037507	06/01/2020	Planning & Performance Committee	Audit & Risk Committee	There is a risk that malware is introduced to the NHS 24 estate		Chief Information Officer	Reduce		12	12 (4x3)	4	31/10/2022
8	RPND/ 037590	07/01/2020	Planning & Performance Committee	Audit & Risk Committee			Chief Information Officer	Retain		12	12 (4x3)	4	31/10/2022
9	RPND/ 044632	21/08/2022	Clinical Governance Committee	Planning & Performance 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	Establishment of Industrial Action Short Life Working Group (Complete) Engage with senior managers to start preparations (Ongoing). Engage with SG EPRR unit to determine a set of planning assumptions. (Ongoing) Review industrial action policies and guidance. Review potential performance impact based on previous experience (Ongoing) Determine impact in terms of TU membership within NHS24 (Ongoing).	12	12 (4x3)	9	31/10/2022
10	RPND/ 041508	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) Project documentation developed for Stages 1(Managers) and 2 (Dentists/Pharmacists) including PID (Development Ongoing – target date for Stage 1 31 July 2022, target date for Stage 2 tbc) 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)	16	12 (4x3)	4	31/12/2022
11	RPND/ 037590	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	31/10/2022
12	RPND/ 041923	16/08/2021	Planning & Performance Committee	Audit & Risk Committee	This is a risk that key milestones for Change Portfolio Board 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 (on-going) Training and development of existing team ongoing to internally grow suitable project resource (on-going) New programme manager post in place to provide additional management support to the team. Tender exercise underway to appoint appropriate external resource to provide independent check and challenge, expertise and experience to undertake phase 2 of the Connect programme. 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). Mitigating Actions Complete Reviewhealth 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)	12	12 (3x4)	9	31/03/2023
13	RPND/ 043294	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
14	RPND/ 044664	24/08/2022	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	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	5	10 (2x5)	1	31/12/2022