

NHS 24 - AMBER - CORPORATE RISK REGISTER (Correct as at 08/12/2021)

NHS 24 BOARD MEETING - 16 DECEMBER 2021

| 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/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 | 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) Review/Health check and Recovery Plan for Connect Programme (Complete). Increase in frontline staff numbers to counter the reduced performance times (Dec 2021 then pipeline thereafter) Clear communications plan in place for internal/stakeholder comms. Weekly planning meetings in place (Ongoing) Programme Governance Framework in place with service deliver representation to provide ongoing scrutiny of programme design and delivery (Ongoing control) 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. Testing of user experience prior to implementation of changes incorporated into project plans. (Complete) Implementation (Ongoing control) | 20 | 20 | 5 | 31/03/2022 |
| 2 | RPND/042278 | 29/09/2021 | Planning & Performance Committee | Audit & Risk Committee | [REDACTED] | Any issues will be problematic to resolve and will encompass potentially frustrated users. And take longer to resolve due to the adhoc nature of the support arrangements. | Chief Information Officer | Eliminate | 1. Engage with BT for a support model process for initial period of 12 months until we have agreed future state [REDACTED] Target completion December 2021 | 16 | 16 | 1 | 31/12/2021 |
| 3 | RPND/038901 | 03/08/2020 | Staff Governance Committee | Planning & Performance Committee | There is a risk that gaps in specific skills (Project Managers, Ux Designers, Product Owners, User Researchers, Scrum Masters) and capacity across directorates are impacting the ability to deliver strategic objectives. Risk relates to NHS 24/Es ability to reach quality candidates to recruit into specialist roles. | Objectives are not met and service development and improvement is negatively impacted. Quality of work impacted by not having sufficient collaboration input from specific expertise within NHS 24 Delay or non delivery of milestones within change portfolio and/or remobilisation plan. developments don't deliver in line with user needs. | Director of Strategy, Planning & Performance | Reduce | Recruitment/appointment of appropriate resource and skills to deliver the digital priorities contained in the organisational objectives (Ongoing - 31 December 2021) Funding and RAFs in place to allow expansion of PMO team to deliver the programmes and projects as agreed at Change Portfolio Board. (Ongoing - 31 December 2021) Recruitment of additional PM resource continuing with temp and perm adverts being users to attract applications (end Sept) Funding confirmed to support recruitment of required recourse/skills (Ongoing - December) Implementation of the approved Digital Business Case to identify and fill skills cap to delivery organisational priorities (Ongoing - 31 December) Review and reallocation of workloads to reflect prioritisation of work (Complete - initial phase 31 August 2021) Ongoing controls Working with other key teams across the organisation to identify pinch points and plan ahead need for resource to input at particular times (Ongoing Control) Cross Directorate working and planning through SMT to ensure an ongoing shared understanding of organisational priorities (Ongoing Control). | 16 | 16 | 4 | 31/03/2022 |

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| 4 | RPND/ 041923 | 16/08/2021 | Planning & Performance Committee | Audit & Risk Committee | <p>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.</p> | <p>Organisational priorities are not delivered on time.</p> <p>Impacts ability to adapt to current and new work and changing priorities.</p> <p>Benefits are not obtained as planned or anticipated.</p> <p>Key dependencies are missed or not fully understood.</p> | Director of Strategy, Planning & Performance | Reduce | <p>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)</p> <p>Tender exercise underway to identify appropriate resource to fill resource/skills gaps identified (Ongoing - 31 December 2021) Temporary Estates Programme Manager post identified and in post to provide additional support (Complete)</p> <p>Ongoing Controls Portfolio level view of dependencies developed and discussed on a weekly basis with issues escalated to EMT where required (weekly ongoing).</p> <p>Management of project / programme resources through the Change Portfolio Board and PMO with appropriate escalation to SROs where needed ensures resources are prioritised as required (Ongoing control)</p> <p>Fortnightly PMO meetings ensures dependencies across the Portfolio are identified and managed (Ongoing control)</p> <p>Weekly Cross Programme Dependency meeting in place to manage and monitor Estates & Connect dependencies (Ongoing control)</p> <p>Agreed governance structure from project to programme board to portfolio board supporting project teams and SROs address resource or skills gaps (Ongoing control)</p> <p>Programme Highlight Reports reviewed regularly by Head of PMO and Director and then reviewed quarterly by CPB (Ongoing control).</p> | 20 | 16 | 6 | 31/03/2022 |
| 5 | RPND/ 037063 | 24/10/2019 | Planning & Performance Committee | Clinical Governance Committee | <p>There is a risk that the NHS 24 would not be able to sustain an effective response to significant additional pressure/demand on services due to current system and resourcing capacity limitations.</p> | <p>Potential delay in patient care due increased waiting times at peak periods.</p> <p>Impact on performance targets.</p> <p>Additional pressure on staff.</p> | Director of Service Delivery | Reduce | <p>Clinical recruitment pipeline and recruitment plan in place to meet developing organisational and clinical supervision needs. (Ongoing).</p> <p>Estate Strategy that meets recruitment/resource requirements through expansion of sites in the West and East of Scotland (Ongoing - 31 November 2021).</p> <p>SMT work to review NHS 24 priorities and resource required to provide a sustainable plan to support Service Delivery during the winter period (Ongoing - 31 December 2021).</p> <p><u>Ongoing Controls</u></p> <p>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)</p> <p>Overview by NHS 24 IMT/SMT to ensure cross directorate approach to provide organisational support. (Ongoing Control)</p> <p>Increased utilisation of remote clinical supervision and remote management (Ongoing Control)</p> <p>Weekly recruitment and training overview meetings to monitor and manage process (Ongoing Control)</p> <p><u>Mitigating Actions Complete.</u></p> <p>24/7 Technical on-call support to ensure any system issues are resolved quickly (Complete).</p> <p>Developed Management Team to support expanding workforce and services (Complete)</p> <p>Corporate escalation process to support frontline services, in line with ongoing review of organisational priorities and resource allocation/deployment (Complete)</p> <p>Technical assurance on system stability, flexibility and performance (Complete)</p> | 16 | 16 | 4 | 01/07/2022 |
| 6 | RPND/ 038259 | 09/04/2020 | Staff Governance Committee | Clinical Governance Committee | <p>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.</p> | <p>Prolonged waits to access services resulting in poor patient experience and reputational damage.</p> <p>Impacts negatively on staff morale, retention and wellbeing.</p> | Director of Workforce | Reduce | <p><u>Mitigating Actions - Ongoing</u></p> <p>Implementation of Attendance Improvement Plan (regular updates on progress being monitored by Staff Governance Committee). Key actions:</p> <ul style="list-style-type: none"> - Wellbeing Team Managers in place to drive progress in relation to improvement plan and ensure a positive and consistent approach to attendance management (March 2022) - 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) - Health & Wellbeing initiatives for staff to support by providing positive working environment, occupational health services and one to one support (Ongoing control). - Development of Workplace Adjustment Policy in partnership with Business Disability Forum (Complete - progressing recommendations March 2022) - Phase 2 of Shift Review would align managers with teams to provide a more supportive and team working environment (Ongoing - 31 July 2022) - Continued promotion of LFT and PCR testing and vaccination programme with 90% of staff double vaccinated (Ongoing Control) <p><u>Mitigating Actions - Complete</u></p> <p>Health & Wellbeing Strategy and Framework in place. (Complete)</p> <p>Improved sickness absence reporting suite with improved access for managers (Complete).</p> <p>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).</p> <p>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).</p> <p>Infection control policy and measures in place (Complete)</p> | 16 | 16 | 8 | 31/03/2022 |

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| 7 | RPND/042971 | 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 | Secured recurrent funding in place for mental health (Complete) 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) | NEW | 16 | 8 | 30/06/2022 |
| 8 | RPND/041565 | 08/07/2021 | Planning & Performance Committee | Clinical Governance Committee | There is a risk that number of workstations does not meet demand on any given day at any given site, due to delays with getting sites operational or other factors such as higher call volumes or new services. | Performance compromised (especially at weekends and public holidays) if capacity at sites is less than the number of staff rostered on or if recruitment was delayed due to uncertainty over when workstations would be available to frontline staff. Negative impact on staff due to supervision issues and having to move staff around different sites. | Director of Finance | Reduce | <u>Mitigations - Ongoing</u> All construction/fit out works across the Estate to be completed in line with the Estates Plan (Ongoing - Cardonald HQ - 3/12/21; Norseman House - 15/12/2021; Dundee Block A 17/01/2022; Dundee Block B - 31 January 2022; Lumina Ground Floor - 31 March 2022) Project team and resources in place to deliver on the agreed plan - dedicated Estate Programme Manager now in place (Ongoing - 31-03-2022). <u>Ongoing Controls</u> Ensure decisions on estates are aligned to strategic priorities, with Estates Programme Board providing oversight and governance for the estate programme (Ongoing Control). Develop contingency plans for changes in physical distancing rules (Ongoing Control) Estate capacity to allow flex up or flex down of seating requirements - desk utilisation and recruitment are regularly monitored against capacity (Ongoing Control). Enhancing utilisation statistics for demand v capacity (Ongoing control) Month on month extension option for Lightyear in place should it be required (Ongoing Control) <u>Mitigations - Complete</u> Early engagement with Scottish Government, Central Legal Office and key stakeholders to ensure shared understanding and early identification of any potential issues (Complete). | 9 | 15 | 6 | 31/03/2022 |
| 9 | RPND/041568 | 08/07/2021 | Staff Governance Committee | Planning & Performance Committee | There is a risk that NHS 24 are unable to recruit and retain the right people due to skills shortages across NHS Scotland and NHS 24 not being seen as an employer of choice. | Unable to deliver the strategic plan objectives resulting in reputational damage and negative impact on the wider NHS. Lack of ability and credibility to positively influence change such as SG policy development and to drive innovation. Unable to provide the desired level of service determined by the public and by SG. Unable to provide new and improved services in the future | Director of Workforce | Reduce | <u>Mitigation - Ongoing</u> PIP weekly monitoring of progress towards targets for recruitment of key skillsets (Ongoing Control). Additional support from other corporate services to support immediate recruitment process (Nov 21) Review of recruitment and retention - Scoping exercise complete - Review timescales to be agreed. Workforce strategy 2021-22 - drafted and with Scottish Government for agreement (Ongoing) Draft workforce strategy for 2022-25 to be developed (Ongoing - March 2022) Development and implementation of i-Matter action plan (Ongoing - 31 March 2022) Wider cultural work and career pathways to be undertaken (31 March 2022) <u>Mitigation - Complete</u> Strategic Workforce Planning Group established and meeting bi monthly to deliver a coordinated approach to workforce planning and strategy. (Complete) Monthly reporting figures process agreed and in place (Complete) Fortnightly Service Delivery recruitment meetings in place to ensure early intervention of any emerging issues (Complete) | 16 | 12 | 8 | 29/07/2022 |
| 10 | RPND/042273 | 28/09/2021 | Planning & Performance Committee | Audit & Risk Committee | There is a risk that services [REDACTED] are susceptible to an external attack. | This would result in a significant availability issue to services [REDACTED] | Chief Information Officer | Reduce | [REDACTED] | 12 | 12 | 6 | 31/12/2021 |

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| 11 | RPND/ 041489 | 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 NHSInform, Care Information Scotland, Breathing Space etc. | [REDACTED] this risk could result in the web services being unavailable for a significant period of time or for the information provided through these sites being inaccurate. 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 | Mitigating Actions: [REDACTED] COMPLETE 1) Annual Penetration testing by a certified external penetration testing supplier. [REDACTED] 3) Regular internal vulnerability assessment [REDACTED] The above actions will reduce the consequence and likelihood [REDACTED] | 12 | 12 | 4 | 30/04/2022 |
| 12 | RPND/ 037596 | 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 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 | Enable SSL inspection on appropriate categories [REDACTED] 5) Deny internet access to assets that do not require it [REDACTED] | 12 | 12 | 8 | 31/03/2022 |
| 13 | RPND/ 037593 | 07/01/2020 | Planning & Performance Committee | Audit & Risk Committee | There is a risk that undetected Advanced Persistent Threats may be introduced to NHS 24 environment. | Possibility of significant cyber incident (SEPA) | Chief Information Officer | Reduce | Investigation with BT, NHS Scotland Cyber Security Operations Centre. [REDACTED] [REDACTED] [REDACTED] Risk becomes retained | 12 | 12 | 8 | 31/03/2022 |
| 14 | RPND/ 037590 | 07/01/2020 | Planning & Performance Committee | Audit & Risk Committee | [REDACTED] | Reduced ability to deliver 111 services. Increased risk of a significant cyber incident. | Chief Information Officer | Reduce | [REDACTED] [REDACTED] [REDACTED] | 12 | 12 | 8 | 31/03/2022 |
| 15 | RPND/ 041263 | 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 | Reduce | 1) Ensure corporate device is fully patched [REDACTED] 2) Ensure that Corporate endpoint firewall is always on [REDACTED] | 12 | 12 | 8 | 31/12/2021 |
| 16 | RPND/ 037567 | 06/01/2020 | Planning & Performance Committee | Audit & Risk Committee | There is a risk that malicious software or devices could be used [REDACTED] | Malicious software may be used to enumerate or access services and files published on our network | Chief Information Officer | Reduce | [REDACTED] | 12 | 12 | 4 | 28/02/2022 |

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| 17 | RPND/ 039309 | 30/09/2020 | Clinical Governance Committee | Planning & Performance Committee | <p>There is a risk that public and partners perceive any negative experience of the National Urgent Care Pathway to be the responsibility of NHS 24.</p> <p>This will be further impacted depending on uncertain pressures.</p> | <p>Poor patient experience for individuals using the National Urgent Care Pathway.</p> <p>The patient flow across the health and care system does not change, admissions to ED/waiting rooms not reduced/managed effectively.</p> <p>NHS 24's reputation would be negatively damaged across the public and national partners.</p> | Director of Service Delivery | Reduce | <p>Influencing further Redesign of Urgent Care pathways and model of care (ongoing).</p> <p>There is a need for a longer term programme of low level board communications explaining the urgent care pathway as a whole system approach. (Ongoing)</p> <p>NHS 24 will continue to mitigate against this risk with clear signposting communications to help support the public to get the right care in the right place. (Ongoing Control)</p> <p>Consistent, effective national communication about new pathways needs to be ongoing and become part of business as usual communications across the whole system including health and care partners. (Ongoing Control)</p> <p>Clear expectation management messaging with the public throughout the winter will be key given system pressures and anticipated demand. (Ongoing)</p> <p>The rollout of a national high profile communications campaign with 111 as the clear call to action has taken place and will be completed by the end of August 2021. (Complete)</p> | 12 | 12 | 6 | 31/03/2022 |
| 18 | RPND/ 041506 | 04/07/2021 | Staff Governance Committee | Clinical Governance Committee | <p>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).</p> | <p>Challenging performance and workforce planning which negatively impacts ability to provide a sustainable service.</p> <p>Limits ability of NHS 24 to deliver desired outcomes from strategic delivery plan.</p> <p>Increased cultural issues associated with lack of teaming approach on front-line.</p> | Director of Service Delivery | Reduce | <p>Re-establishment of Shift Review Working Group with appropriate representation. (Ongoing - tbc) Project documentation developed with timelines to be confirmed (Ongoing - tbc).</p> <p>Staff Engagement / Communications Plans to be put in place in line with project plan (Ongoing - tbc).</p> <p>Robust review and assessment of performance/Management Information data to ensure a full understanding of the organisational requirements (Ongoing - 31 July 21).</p> <p>Robust modelling to establish additional resource required to support increase frontline staffing numbers. Ongoing - 31 July 21)</p> | 12 | 12 | 4 | 30/06/2022 |
| 19 | RPND/ 041610 | 13/07/2021 | Clinical Governance Committee | Planning & Performance Committee | <p>There is a risk that patient access times to the 111 service will increase due to a reduction in patient access to in-hours primary care and increased referrals by GP's surgeries.</p> | <p>Increased demand for services - patient safety may be compromised due to excessive wait times. Reputational Damage</p> | Director of Service Delivery | Reduce | <p>Communications plan including consistent and clear signposting for the public to appropriate service and real time messaging on social media (Ongoing Control)</p> <p>Ongoing stakeholder and sponsor discussions re models of care/clinical pathways (Ongoing Control)</p> <p>Phase 2 of the shift review which will allow more engagement with managers and staff to support CPD and identify learning needs (Ongoing - 30-07-2022)</p> <p>Recruitment/Training programme in place (Ongoing Control) NHS Inform digital tools (Complete)</p> <p>Robust attendance management processes in place (Complete)</p> <p>Potential change to covid isolation rules for NHS/Health Care Staff who are double vaccinated (Complete)</p> | 12 | 12 | 8 | 31/03/2022 |
| 20 | RPND/ 038255 | 09/04/2020 | Staff Governance Committee | Planning & Performance Committee | <p>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.</p> | <p>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</p> | Director of Workforce | Reduce | <p><u>Mitigating Actions - Ongoing</u></p> <p>Implementation of the Wellbeing Strategy, Framework and action plan developed to support staff across a number of areas including:</p> <ul style="list-style-type: none"> - Undertaking a review of Occupational Health Service (March 2022) - Promotion of training and resilience (March 2022) - Develop wellbeing communications plan/wellbeing hub on intranet (Complete - actions being progressed March 22) - Establishment of measure to assess impact of wellbeing initiatives on workforce (Ongoing - March 2022) - promotion of wellbeing initiatives (Ongoing Control) - 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. <p><u>Mitigating Actions - Complete</u></p> <p>Staff wellbeing work stream in place. A group is established to support the management/co-ordination of activity. Outputs feed into the IMT/PIP (Complete).</p> <p>Staff wellbeing been incorporated into the Health, Safety & Wellbeing Committee (Complete)</p> | 12 | 12 | 6 | 31/03/2022 |

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| 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 | | <u>Mitigation - Ongoing</u> Workforce Directorate review of structures (Ongoing - 31 Mar 22) ICT Restructure (Ongoing - 31 December 2021) Skills and competency mapping across organisation to understand the gaps (Ongoing - target date tbc by SWPG) 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) Development of an operational workforce planning group – established Nov 21 with a 6 month work plan (Ongoing - May 2022) Agile working policy approved Dec 21 to empower employees to work agilely, where appropriate in the context of business needs (Ongoing). Extension of temporary resources with Workforce to support two key areas of risk – attendance management and recruitment (Ongoing – June 22) <u>Mitigation - Complete</u> Strategic Workforce Planning Group established and meets bi monthly; monitoring will uncover gaps (Complete) UK Benchmarking of OD, Leadership & Learning to understand best practice and to identify staff to customer ratios (Complete - scheduled for publication 30 Sept 21) Finance agreed budget availability for resource to support (temp/agency/perm) (Complete). Bid submitted to Scottish Government to support resourcing (Submission date 03/09/2021). | 16 | 12 | 6 | 30/09/2022 |
| 22 | RPND/ 041686 | 21/07/2021 | Staff Governance Committee | Clinical Governance Committee | There is a risk that if NHS 24 does not meet their statutory obligations in relation to staff training, potential knowledge/skills gaps of staff may negatively impact on the safety and quality of the patient journey. | 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. Reputational damage if staff not trained to a certain standard. | Director of Workforce | Reduce | Action/Improvement Plan developed for implementation, key highlights as follows: Management Essentials Programme in place (Ongoing - December 2023) Agree Mandatory Training e-learning modules (and required frequency) that are aligned to the once for Scotland requirements (all staff) (30/07/2021 - Complete) Agree role specific clinical mandatory modules. Annual review will be undertaken via the Clinical Education Governance Group (30/07/2021 - Complete) Evaluation of Mandatory Training - consider methodology / establishment sub-group (feedback mandatory on all e-learning modules) - annual report to Clinical Education Governance Group (30/08/2021) Monthly engagement and trajectory reports and visibility of MI data for consideration by Teams/Line Managers/SMT/EMT (30/09/2021) Review of intranet pages and navigation on [REDACTED] (30/07/2021 - Complete) Phased communications plan re mandatory training requirements/ the importance of mandatory training and the responsibilities of staff/line managers (Complete) | 10 | 10 | 5 | 31/12/2022 |