NHS 24 - AMBER - CORPORATE RISK REGISTER (Correct as at 10/02/2022)

BOARD MEETING - 24 FEBRUARY 2022

Case Receipt Ref Date	Primary Governance	Secondary Governance	Description	Significant Impact	Executive Risk	Strategy Type	Mitigating Action		Current Score	Score	arget Date
RPND/ 037063 24/10/2019	Committee 9 Planning & Performance Committee	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.	Owner Director of Service Delivery	Reduce	Mitigating Actions - Ongoing Clinical recruitment pipeline and recruitment plan in place to meet developing organisational and clinical supervision needs. (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 arrangements within IMT 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) 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)	(AxB) 16	(AxB) 16		//07/2022
RPND/0 29/09/2021 42278	1 Planning & Performance Committee	Audit & Risk Committee		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.		1	Target completion March Target completion March	16	16	1 31	/03/2022
RPND/0 38259 09/04/2020	D 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	Mitigating Actions - Ongoing Implementation of Attendance Improvement Plan (regular updates on progress being monitored by Staff Governance Committee). Key actions: - Wellbeing Managers are taking a proactive approach to new isolation guidance which will maximise attendance availability. (Ongoing - March 22) - Funding secured for an additional 3 Administrators who will be actively support the implementation of the Attendance Management Process - Increased Formal Attendance Meetings to support line managers in managing attendance of their staff, signalling expectations to staff of the importance to attend work 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) Audit to be undertaken by Internal Audit of Attendance Management Processes (Ongoing - 31 March 2022) Mitigating Actions - Complete Health & Wellbeing Strategy and Framework in place. (Complete) Improved sickness absence reporting suite with improved access for managers (Complete). 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). 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). Wellbeing Team Manager	16	16	8 31	/03/2023
RPND/0 41923	1 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.	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 Finance	Reduce	Mitigating Actions Ongoing Development of NHS 24 Strategy and RMP4 will identify key areas for development and potential demands on future PMO resource (Ongoing - tbc) Appropriate project control documentation developed providing clear dependencies, deliverables and plans (Ongoing) Ongoing Controls 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 the Change Portfolio Board and 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 CPB (Ongoing control). 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	16	12	6 31	/08/2022

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RPND/0	08/07/2021	Planning &	Staff	There is a risk that number of workstations does	Performance compromised (especially at	Director of	Reduce	Mitigations - Ongoing	15 1	2 6	31/03/2022
41565		Performance Committee		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.	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.	Finance		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 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). Ongoing Controls 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) Mitigations - Complete Early engagement with Scottish Government, Central Legal Office and key stakeholders to ensure shared understanding and early identification of any potential issues (Complete). Reduction in number of sites in the West to support supervision model (Complete)			
RPND/0 41567	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 omnicompetence to ensure resilience in their service delivery	Director of Workforce		Mitigation - Ongoing Workforce Directorate review of structures (Ongoing - 31 Mar 22) Director level portfolio function review (Ongoing - 31 August 2022) 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) Established the group however stood down at present to allow focus by Service Delivery on festive/winter. 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 which now equates to 7 Agency / Fixed Term staff to support volume recruitment – attendance management and recruitment (Ongoing – June 22) Mitigation - Complete 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). ICT Restructure (Complete - 31 December 2021) Skills and competency mapping across organisation to understand the gaps (Complete)	12 1	2 6	30/09/2022
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) 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)	12 1	2 4	31/07/2022
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 NHSInform, Care Information Scotland, Breathing Space etc.	, 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		Security - RO: SG: 1)Annual Penetration testing by a certified external penetration testing supplier. 3)Regular internal vulnerability assessment The above actions will reduce the consequence and likelihood	12 1	2 4	30/04/202
RPND/0 38901	03/08/2020	Staff Governance Committee	Planning & Performance Committee	There is a risk that gaps in specific skills and capacity across the digital team are impacting the ability to deliver strategic objectives. Risk relates to NHS 24's ability to recruit and retain 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 causing reputational damage	Chief Information Officer	Reduce	Mitigations Ongoing Recruitment/appointment of appropriate resource and skills to deliver the digital priorities contained in the organisational objectives (Ongoing - discussions with Scottish Government) Funding and RAFs in place to allow expansion of PMO team to deliver the programmes and projects as agreed at Change Portfolio Board. (Ongoing - timeline dependant on outcome of business case approval) Recruitment of additional PM resource continuing with temp and perm adverts being users to attract applications (Complete) Implementation of the approved Digital Business Case to identify and fill skills cap to delivery organisational priorities (Ongoing - implementation start date 31 May 2022) Mitigations Complete Review and reallocation of workloads to reflect prioritisation of work (Complete - initial phase 31 August 2021) Ongoing Controls. Ongoing Controls 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 1	2 4	30/06/2022

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10 RPND/0 39309	0 30/09/2020	Planning & Performance Committee	Audit & Risk Committee	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. This will be further impacted depending on uncertain pressures.	Poor patient experience for individuals using the National Urgent Care Pathway. The patient flow across the health and care system does not change, admissions to ED/waiting rooms not reduced/managed effectively. NHS 24's reputation would be negatively damaged across the public and national partners.	Director of Service Delivery	Reduce	Ongoing Controls Influencing further Redesign of Urgent Care pathways and model of care (Ongoing Control). 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 Control) 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) 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) Clear expectation management messaging with the public throughout the winter will be key given system pressures and anticipated demand. (Ongoing Controls) Mitigations Complete 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)	12 12	6	31/03/2022
11 RPND/0 41610	13/07/2021	Clinical Governance Committee	Planning & Performance Committee	There is a risk that patient access times to the 111 service will increase due to displaced service demand.	Increased demand for services - patient safety may be compromised due to excessive wait times. Reputational Damage	Director of Service Delivery	Reduce	Mitigating Actions and Controls - Ongoing Communications plan including consistent and clear signposting for the public to appropriate service and real time messaging on social media (Ongoing Control) Ongoing stakeholder and sponsor discussions re models of care/clinical pathways (Ongoing Control) 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) Recruitment/Training programme in place (Ongoing Control) Mitigating Actions Complete NHS Inform digital tools (Complete) Robust attendance management processes in place (Complete) Potential change to covid isolation rules for NHS/Health Care Staff who are double vaccinated (Complete)	12 12	8	29/07/2022
12 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) Mitigating Actions - Complete Secured recurrent funding in place for mental health (Complete) Mitigating Ongoing Controls 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)	16 12	8	30/06/2022
13 RPND/0 42273	28/09/2021	Planning & Performance Committee	Audit & Risk Committee	There is a risk that services are susceptible to an external	This would result in a significant availability issue to services	Chief Information Officer	Reduce		12 12	6	31/03/2022
14 RPND/0 37593	0 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		Investigation with BT, NHS Scotland Cyber Security Operations Centre, Becomes retained Risk	12 12	8	31/03/2022
15 RPND/0 37567	06/01/2020	Planning & Performance Committee	Audit & Risk Committee	There is a risk that malicious software or devices could be used	Malicious software may be used to enumerate or access services and files published on our network	Chief Information Officer	Reduce		12 12	4	28/02/2022
41263	0 07/06/2021	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 2) Ensure that Corporate endpoint firewall is always on	12 12	8	31/03/2022
17 RPND/0 37590	07/01/2020	Planning & Performance Committee	Audit & Risk Committee		Reduced ability to deliver 111 services. Increased risk of a significant cyber incident.	Chief Information Officer	Reduce		12 12	***	31/03/2022

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18	RPND/0	07/01/2020 Planning &	Audit & Risk	There is a risk that malware is introduced from	Possibility of significant cyber incident resulting	Chief	Reduce	Enable SSL inspection on appropriate categories	12	12	8	31/03/2022
	37596	Performance Committee	Committee	the Internet to the NHS 24 estate via web browsing activities from any desktop, laptop or server asset	in reduced ability to deliver 111 services and/or integrity and loss of confidentiality of sensitive data	Information		5) Deny internet access to assets that do not require it		↔	Ü	01/00/2022
19	RPND/0 43294	11/01/2022 Planning & Performance Committee	Audit & Risk Committee	There is a risk that without the successful implementation of appropriate controls,	This would impact the confidentiality and integrity by allowing NHS 24 information to be removed from the estate.	Chief Information Officer	Reduce	The actions detailed below will mitigate by reducing the likelihood of this risk occurring.	NEW	12	8	31/03/2022
20	RPND/0 38255	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	Mitigating Actions - Ongoing - tbc) Implementation of the Wellbeing Strategy, Framework and action plan developed to support staff across a number of areas including: - 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. Launch of new Wellbeing 'Thrive' App (Feb 2022) Mitigating Actions - Complete 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). Staff wellbeing been incorporated into the Health, Safety & Wellbeing Committee (Complete)	12	12	6	31/07/2022
21	RPND/0 41505	04/07/2021 Planning & Performance Committee	Clinical Governance Committee	There is a risk that the combined implementation of Connect Programme phase 1c and 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		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	10	5	31/03/2022

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