

<p>NHS 24 BOARD PAPER</p> <p style="text-align: right;">18 AUGUST 2022 ITEM NO 8.2 FOR ASSURANCE</p> <p style="text-align: center;">CORPORATE RISK UPDATE</p>	
Executive Sponsor:	Medical Director
Lead Officer/Author:	Head of Risk Management and Resilience
Action Required	The paper is provided for review, discussion and assurance.
Key Points for this Committee to consider	<p>It was previously agreed that each of the Board Governance Committee would undertake a review of all risks within its remit on an annual basis. The Board is, therefore, presented with all corporate risks following review by each of the Committees. This excludes project and programme risks unless escalated.</p> <p>Since last presented to the Board, key changes to corporate risks are as follows:</p> <ul style="list-style-type: none"> • The overall risk profile has marginally reduced • 2 new risks have been identified • 6 risks have been closed • 5 risks have reduced • 5 risks have increased
Date presented to EMT and relevant Committee	<p>Before presentation to the Board all risks have been reviewed and updated at a directorate level and considered by the following groups:</p> <p>07/07/22: EMT Risk & Opportunities Group 28/07/22: Staff Governance Committee 04/08/22: Planning & Performance Committee 08/08/22: Clinical Governance Committee 09/08/22: EMT Business Meeting 11/08/22: Audit & Risk Committee</p>
Strategic alignment and link to overarching NHS Scotland priorities and strategies	This paper provides assurance to the Committee and Board and that there is an effective risk management process in place to support delivery of the NHS 24 contribution to our Annual Delivery Plan and Strategic Intent.
Key Risks	The key risks are outlined in this paper.
Financial Implications	There are no direct financial implications associated with this report. Any financial implications will be

	highlighted within the risk register attached.
Equality and Diversity	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 processes in place.

2. RISK MANAGEMENT UPDATE

- 2.1 The attached Risk Register provides an update on all corporate risks as at 2 August 2022.
- 2.2 There are 44 corporate risks in total (22 scoring 10 and above and 22 scoring below 10).
- 2.3 At the last Board meeting (16 June), there were 48 corporate risks. Since then, the overall risk profile has reduced slightly, mainly due to progress in relation to the mitigation of several key ICT risks. 6 risks have been closed, 5 risk has reduced, 5 have increased and 2 new risks have been identified. Further detail provided in Section 3 of this Report.
- 2.4 It had been agreed that each of the Board Committees would be presented annually with a risk register which contained all risks within their remit to provide complete overview of all risks. These were presented to the Committee as set out above
- 2.5 Target dates for a number of key ICT risks have been updated to re-align them with the updated delivery plan for Connect 1c. In particular risk RPND/036117 has increased in score from 9 to 16.

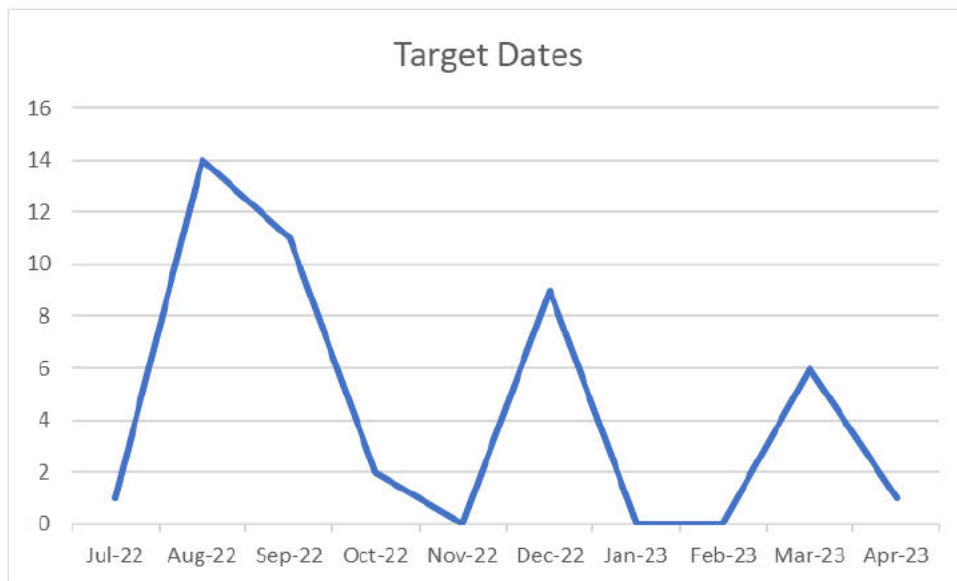
3. RISK SUMMARY

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.

Figure 1. Risk Profile

		Score	Likelihood					Total	Prev Score
			Rare	Unlikely	Possible	Likely	Almost Certain		
			1	2	3	4	5		
Impact	Extreme	5	-	0 (1)	0 (0)	0 (0)	0 (0)	0	(1)
	Major	4	-	9 (6)	13 (17)	6 (4)	0 (0)	28	(27)
	Moderate	3	-	5 (4)	3 (7)	3 (4)	0 (0)	11	(15)
	Minor	2	-	1 (1)	1 (1)	3 (3)	0 (0)	5	(5)
	Negligible	1	-	-	-	-	-		(0)
Total			-	15	17	12	0	44	
<i>Prev Score</i>				(12)	(25)	(11)	(0)		(48)

Figure 2. Target Date



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

3.3 Target dates for a number of ICT risks have recently been updated to re-align them with the updated delivery plan for Connect 1c. [REDACTED]

3.3.1 There are currently 1 risk where the target dates have passed, RPND/041263. This risk is proposed for closure and is waiting final approval through the usual governance channels.

Figure 3. Areas of Risk



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

Reduced Risks

3.4 Since previously reported, 5 risk has reduced in score as follows:

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 score was reduced following a short period of stability and the ongoing controls in place. However, due to the increased sickness absence and growing pressures on the service, this risk is being closely monitored.

RPND/041489: 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. This risk reduced [REDACTED]

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. As above, this risk score was reduced following a short period of stability and the ongoing controls in place but is being closely monitored.

RPND/041567: 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. This risk has reduced as the organisation moved out of the pandemic, was able to progress mitigating actions and has a clearer picture of the emerging needs of the organisation.

RPND/041263: There is a risk that NHS 24 Corporate devices may be compromised through vulnerabilities in home networks and home devices. This risk has reduced [REDACTED]

Increased Risks

3.5 Since previously reported, 5 risks have increased in score as follows:

RPND/036117: 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 [REDACTED]

RPND/044024: 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. This risk has increased due to the funding requirements. Options are available and are being progressed by the EMT.

RPND/042971: 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. As above, this risk has increased due to the financial clarification required on NHS 24's allocation for 2022/23.

RPND/041506: There is a risk that the benefits of the initial phase of the investing in our leadership are not fully realised without the successful deployment of the next phase (managers/dentists/pharmacists).

RPND/041923: This is a risk that key milestones for change programmes will not be delivered due capacity and recruitment issues within the PMO. As the organisation emerged from the pandemic and projects and programmes of work are being picked up and progressed, work is underway to establish clear priorities and delivery plan for the organisation. This risk has increased while this work is undertaken as demand on resources increases but it is anticipated it will reduce again once clear organisation priorities are agreed.

Closed Risks

3.6 Where a risk owner reviews a risk and considers that it either has been mitigated as far as possible or no longer exists then it can be closed. Since previously reported, 6 risks have been closed as follows:

RPND/043988: BT do not

RPND/042273: There is a risk that [REDACTED] are susceptible to an external [REDACTED]. The consequence reduced bringing the overall score to a 6 and a tolerable level.

RPND/037593:

Key actions such as implementing [REDACTED]. Reducing the risk to a tolerable score of 8.

RPND/041565: There is a risk that number of workstations does not meet demand on any given day at any given site. This risk has been closed following completion of the works across the NHS 24 Estate.

RPND/041505: 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'. Closed following completion of all mitigating actions

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 was previously scored high due to the pressures of the pandemic but as we are getting back to BAU there are sufficient controls now in place to reduce this risk to an acceptable level and this risk has been closed.

New Risks

3.7 Since previously reported, 2 new risks have been identified as follows:

RPND 044632: There is a risk that public Sector, in particular NHS, industrial action may disrupt the provision of services. The Committee will be aware of ongoing discussions in relation to potential industrial action and will be kept updated as matters progress.

RPND/044714: There is a risk that we do not use our estate infrastructure effectively. With uncertainty around physical distancing, flexible working, potentially lower than expected headcount and estate plans from other Boards there could be a missed opportunity to make best use of the space

4. PROGRAMME RISK

4.1 A number of programme related risks are reflected on the risk register including Connect and Frontline Leadership Capacity.

NHS 24 - AMBER - CORPORATE RISK REGISTER (Correct as at 02/08/2022)

BOARD MEETING - 18 AUGUST 2022

Case Ref	Receipt Date	Primary Governance Committee	Secondary Governance Committee	Description	Significant Impact	Executive Risk Owner	Strategy Type	Mitigating Action	Prev Score (CxL)	Current Score (CxL)	Target Score (CxL)	Target Date
1	RPND/036117	24/06/2019	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. Increased costs associated with Connect programme delivery and extending support for older infrastructure and software. Potential impact on implementing service changes as a result of an extended change freeze on existing apps/infrastructure.	Chief Information Officer	Reduce 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) to software as a service by October 2022. 14) Laptop rollout - Key milestone March 2022 COMPLETE RO Architecture 15) rollout Target March 2022 COMPLETE 16) June 2022 Completion of these will reduce C&L by score of 1 - Target C2 L2 Phase 1c: RO: Change Delivery 11) Greater resilience through 2 active data centres with zero or very limited downtime for change - ; Bring forward other areas of the programme, e.g. non-clinical apps migration, to ensure overall programme end date is not extended as a result of the clinical stack workstream delays. other non-clinical apps including to be completed in next release cycle. RO: Operations / Change Delivery 12) Implementation of new infrastructure July 2022 RO: Clinical Systems Development 10) will migrate to new Data Centre by February 2022 COMPLETE January 2022 with dual running until March 2022 COMPLETE Completion of these will reduce C&L by 1 - Target C1 L1	9		4	31/10/2022
2	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 Mitigations Ongoing Development and Approval of Outline Business Case/Options Paper (Ongoing - August 2022) Phased implementation plan of preferred option in place (Ongoing) - August 2022 Clarification from Scotland Government on recurring frontline allocation (Ongoing - August 2022) Ongoing Controls Early engagement with finance team (Ongoing Control)	12	16 (4x4)	4	31/08/2022
3	RPND/043987	24/03/2022	Planning & Performance Committee	Staff Governance Committee	There is a risk that when the goes out of support:	NHS 24 will lose all support from in relation to incident resolution, troubleshooting This could result in NHS 24's ability to create staff schedules and manage resource would be severely impacted.	Chief Information Officer	Reduce This will be discussed and actions agreed at the May DTAG Meeting. 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 - Target completion July 22 Completion of these will reduce likelihood and consequence by 3- Risk becomes 1	16	16 (4x4)	1	31/03/2023
4	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 Mitigating Actions - Ongoing 1. 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) 2. Confirmation of breakdown of NHS 24's allocation (Ongoing) Mitigating Actions - Complete 1. Secured partial recurrent funding in place for mental health (Complete) Ongoing Controls 1. SPRA process in place to enable prioritisation for use of funding to ensure balanced budget (Ongoing Control) 2. RMP4 and SPRA as a vehicle for getting commitment for funding of strategic priorities (Ongoing Control) 3. 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) 4. Continued monitoring of performance and governance processes in place to evaluate and enable quick decisions if the funding landscape changes (Ongoing Control)	12	16 (4x4)	8	31/08/2022
5	RPND/041506	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)	12	16 (4x4)	4	31/12/2022

6	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	<p>Mitigating Actions - Ongoing</p> <p>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:</p> <ol style="list-style-type: none"> We will continue to be proactive due to more relaxed PC Controls. COVID Special Leave due to stop from July 22. All Directors and Managers to have attendance targets as an objective within their Appraisal. Manager Dashboards to be rolled out from July to ensure accountability. Increased Formal Attendance Meetings to support line managers in managing attendance of their staff, signalling expectations to staff of the importance to attend work (ONGO NG). Conduct Workplace Adjustment Policy Workshops and integrate within the Management Essentials Programme from 2023 (Jan 2023) Health & Wellbeing initiatives for staff to support by providing positive working environment, occupational health services and one to one support (Ongoing control). Phase 2 of Shift Review would align managers with teams to provide a more supportive and team working environment (Ongoing - 31 July 2022) Ongoing Audit to be undertaken by Internal Audit of Attendance Management Processes (Ongoing - 31 March 2022) COMPLETE - Audit now complete and recommendations and actions shared with Audit Committee, EMT & SMT. Wellbeing Managers will continue and recruitment underway for an addition 1 x WTE at Dundee Centre by end of June. <p>Mitigating Actions - Complete</p> <ol style="list-style-type: none"> Health & Wellbeing Strategy and Framework in place. (Complete) - Plan under review for 2022/23 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). Further plan of support and learning to be put in place for line managers, currently being developed with Wellbeing Team Managers. 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). Infection control policy and measures in place (Complete) 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. Development of Workplace Adjustment Policy in partnership with Business Disability Forum (Complete) Wellbeing Managers are taking a proactive approach to new isolation guidance which will maximise attendance availability. (Ongoing - March 22) 	16	16 (4x4)	8	31/03/2023
7	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</p> <p>Clinical recruitment pipeline and recruitment plan in place to meet developing organisational and clinical supervision needs. (Ongoing). Review of operational model for dentistry (Ongoing)</p> <p>Ongoing Controls</p> <p>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 MT/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</p> <p>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>	16	12 (4x3)	4	31/03/2023
8	RPND/037567	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	31/08/2022
9	RPND/043294	11/01/2022	Planning & Performance Committee	Audit & Risk Committee	there is a risk that		Chief Information Officer	Reduce		12	12 (4x3)	4	31/08/2022
10	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	<p>Mitigating Actions - Ongoing</p> <ol style="list-style-type: none"> Conduct an organisational review of training structures and content. (SEPT 22) Explore most effective structures for administering and delivering training. (NOV 22) Devise an easily accessible Prospectus. (NOV 22) Devise approach to aligning CPD protected learning time to new approach to training (including mandatory) and CPD. (NOV 22) Review and refresh Corporate Induction. (NOV 22) Publish Training Calendar. (DEC 22) <p>Mitigating Actions - Complete</p> <ol style="list-style-type: none"> Formation of a Training Project Team and a Training Project plan. (COMPLETE) 	12	12 (4x3)	8	30/12/2022
11	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	<p>Mitigating Controls - Ongoing</p> <p>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) Continued use of NHS Inform to help direct callers to the appropriate service (Ongoing Control)</p>	16	12 (4x3)	8	30/09/2022

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.	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	<p>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)</p> <p>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).</p> <p>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)</p>	8	12 (4x3)	6	31/08/2022
13	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	<p>Mitigating Actions - Ongoing Implementation of the Wellbeing Strategy, Framework and action plan developed to support staff across a number of areas including: 1. 2022/23 Wellbeing Plan to be implemented June 2022 taking account of previous years review.. 2. Establishment of measure to assess impact of wellbeing initiatives on workforce (Ongoing - March 2022) - Part of review of Wellbeing Plan for 2022/23 3. Promotion of wellbeing initiatives (Ongoing Control) - ongoing as part of 2022/23 Healthy Working Lives Plan and review of Wellbeing Action Plan. 4. 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> <p>Mitigating Actions - Complete 1. Staff wellbeing work stream in place. A group is established to support the management/co-ordination of activity. 2. Outputs feed into the MTP P (Complete). 3. Staff wellbeing been incorporated into the Health, Safety & Wellbeing Committee (Complete) 4. Launch of new Wellbeing 'Thrive' App (Feb 2022) (Complete) 5. Retention Recover Plan (Ongoing - tbc) COMPLETE - Now Attrition Improvement Plan which will mitigate to some degree wellbeing concerns. 6. Undertaking a review of Occupational Health Service (March 2022) COMPLETE 7. Promotion of training and resilience (March 2022) - Develop wellbeing communications plan/wellbeing hub on intranet (Complete - actions being progressed March 22). 8. Review of use of Thrive app to be undertaken at the end of March 2022. COMPLETE 9. Undertaking a review of Occupational Health Service (March 2022) COMPLETE 10. Review of use of Thrive app to be undertaken at the end of March 2022. COMPLETE</p>	12	12 (4x3)	6	30/12/2022
14	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 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
15	RPND/037590	07/01/2020	Planning & Performance Committee	Audit & Risk Committee	[REDACTED]	[REDACTED]	Chief Information Officer	Retain	[REDACTED]	12	12 (4x3)	4	30/09/2022
16	RPND/039878	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	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) Business case for additional resources objectively reflecting the additional demand in train for tabling at EMT (30/07/2021) 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) Recruitment of additional resource (Ongoing - September 2022) (Process complete - 31 June 2022)	12	12 (3x4)	3	30/09/2022
17	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	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	31/08/2022
18	RPND/043660	18/02/2022	Clinical Governance Committee	Planning & Performance Committee	There is a risk, that as predicted, the recovery of dentistry in the community is limited and continues to be impacted by the pandemic resulting in public health consequences. This will increase the complexity of patient's presenting symptoms, when contacting 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	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). Review of operational models for dentistry (Ongoing)	12	12 (3x4)	3	31/08/2022

19	RPND/043659	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 Sept 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	<p>Mitigations - Ongoing</p> <p>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 has been submitted to Scottish Government Sponsor team in pursuit of recurring funding for this service when Covid funding ceases (Ongoing - August 2022). 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)</p>	12	12 (4X3)	4	31/08/2022
20	RPND/044632	21/06/2022	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.	Medical Director	Reduce	<p>Mitigating Actions - Ongoing</p> <p>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 (Ongoing - Sept 2022). Review potential performance impact based on previous experience (Ongoing - Sept 2022). Determine impact in terms of TU membership within NHS24 (Ongoing - Sept 2022).</p>	NEW	12 (4x3)	9	31/10/2022
21	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	<p>Mitigating Actions - Ongoing</p> <ol style="list-style-type: none"> 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) SMT to make recommendations to EMT on how Estate is utilised moving forward (Sept 2022) <p>Mitigating Actions - Complete</p> <ol style="list-style-type: none"> 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
22	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	<p>1. Engage with BT for a support model process for initial period of 12months until we have agreed future state [REDACTED]</p> <p>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) COMPLETE RO: Architecture /Operations / CIO</p> <p>Description for Technical Resource [REDACTED] CIO currently drafting Job Resilience within Operations Team can support and identify appropriate training needs. (L) Target December 2022</p>	12	12 (4X3)	1	31/12/2022