	Case Ref	Receipt Date	Primary Committee	Secondary Committee	Description	Significant Impact	Executive Risk Owner	Strategy Type	Mitigating Action	Prev Score (AxB)	Current Score (AxB)	Target Score (AxB)	Target Date
1	RPND/ 037063	24/10/2019	Planning & Performance Committee	Clinical Governance Committee	There is a risk that the NHS 24 would not be able to sustain an effective response to significant additional pressure/demand on services (i.e. any health outbreak) 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	Technical assurance on system stability, flexibility and performance (Ongoing) 24/7 Technical on-call support to ensure any system issues are resolved quickly (In place). Clinical recruitment pipeline and recruitment plan in place to meet developing organisational and clinical supervision needs (Ongoing) Developed Management Team to support expanding workforce and services (Ongoing) Weekly recruitment and training overview meetings to monitor and manage process (Ongoing) Estate Strategy that meets recruitment/resource requirements. (Ongoing) Corporate escalation process to support frontline services in line with ongoing review of organisational priorities and resource allocation/deployment (Ongoing) Close liaison with Scottish Government and key stakeholders (Ongoing) Overview by NHS 24 IMT/SMT to ensure cross directorate approach. (Ongoing) Increased utilisation of remote clinical supervision and remote management (Ongoing)	20	20 ⟷	8	29/10/2021
2	RPND/ 038259	09/04/2020	Staff Governance Committee	Clinical Governance Committee	There is a risk that staff's attendance at work through COVID-19, combined with Scottish Government requirements for staff to self-isolate, and general sickness rates, impact our ability to deliver services.	Increased staff absence, impacting on NHS 24's ability to deliver services. Prolonged wait to access services resulting in poor patient experience and reputational damage Clinical supervision numbers will not meet our requirements Increased pressure on other staff, resulting in poor morale Increase time spent on interpreting and managing the application of NHSScotland policies	Director of Workforce	Reduce	Attendance Improvement Plan in place with specific actions. Progress monitored by Staff Governance, Planning & Performance and Audit & Risk Committees (Ongoing). Health & Wellbeing Steering Group is developing an action plan to support the staff engagement in relation to Attendance Management by 31 August 2021.. (complete) Recruitment for Wellbeing and Engagement Manager post are now in place for the west centres (Complete). These staff members in place and developing KPI's and action plan to deliver objectives by 31st August 2021. (Ongoing) Improved reporting and access to reporting for managers on sickness absence by establishing a suite of reports for Head of Clinical Services to support the auditing and governance of absence recording, reporting and case management due 31 August 2021 (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). Productivity Improvement Plan (PIP) monitoring progress in relation to attendance targets (Ongoing) Provision of Health & Wellbeing initiatives for staff to support by providing positive working environment, occupational health services and one to one support (Ongoing). COVID-19 Vaccination Programme in place (Ongoing) Access to Government national testing capability and Lateral Flow Testing available to all staff ensures return of staff to workforce when well (Ongoing). Infection control policy and measures in place (complete)	20	16 ⬇	8	30/03/2022

| 3 | 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 the longer the technical transformation (Connect) programme takes to be implemented. ▮ | Increases potential system downtime impacting on the delivery of NHS 24's front line services. ▮ Significant negative impact on public, partner and staff relations. | Chief Information Officer | Reduce | Implementation of the Connect programme: This 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 1 of the Connect Programme is focused on delivering a secure, stable and supported infrastructure platform for NHS 24. There are currently 3 main parts which incrementally will reduce the infrastructure risks to the organisation in line with achieving the Target risk score. Phase 1a: 1. Updated Internet facing Firewalls - COMPLETE. 2. Updated Internal firewalls - COMPLETE 3. Upgrade of supplier monitoring and management tools - COMPLETE ▮ 5. Updated Load balancer - COMPLETE ▮ Phase 1b: ▮ application to software as a service by October 2021 Phase 1c: Approved by the NHS 24 Board in February 2021, the delivery of Phase 1c of Connect is the final significant part of the risk mitigation and aims to ensure our technology is stable, secure and supported through until 2025. Phase 1c will deliver: 1. A stable, secure & supported platform with immediate and future growth accommodated until 2025 with the least demand/disruption to service delivery at this time of increased demand and service change. 2. Greater resilience ▮ 3. Implementation of new infrastructure ▮ | 16 | 16 | 4 ↔ | 31/03/2022 |
| 4 | RPND/ 038901 | 03/08/2020 | Planning & Performance Committee | Clinical Governance Committee | There is a risk the current capacity and identified skills gaps are impacting NHS 24's ability to deliver the emerging digital strategic objectives. | Objectives are not met and service development and improvement is negatively impacted | Director of Service Development | Reduce | Digital and Service Design capacity and capability review to be undertaken to inform investment in this function (Ongoing)

Identify within each area of development, required resources and ensure these are put in place to deliver pieces of work. (Ongoing)

Digital Programme being identified and planned - providing clarity on resources required for organisational visibility and approval (ongoing)

Digital programme identified within organisational priorities, providing leverage to align resources (Ongoing)

Request for additional funding has been submitted to fill skills gap and increase capacity (Ongoing)

ICT/Digital Business Case Development approved, allocation of agreed funding dependant on digital review outputs.

(Ongoing) Digital Business Case Development (Ongoing) | 12 | 16 | 6 ↑ | 30/07/2021 |

5	RPND/ 038970	10/08/2020	Staff Governance Committee	Planning & Performance Committee	There is a risk that if NHS 24 fails to improve its management of sickness absence processes and performance it will impact on its ability to deliver services.	Prolonged wait to access services resulting in poor patient experience and reputational damage. Clinical supervision numbers will not meet our requirements Increased pressure on other staff resulting in poor morale Increased management time spent on sickness absence management, removing from other management responsibilities	Director of Workforce	Reduce	Attendance Management Steering Group leading the implementation of our Attendance Management Improvement Plan (Ongoing). Productivity Improvement Plan (PIP) monitoring progress in relation to attendance targets (Ongoing) Group facilitating the delivery of a continued and sustained improvement in the next 12 months in the management of attendance, enabled through a values based approach, benchmarking our improvement in sickness absence rates with other relevant health care settings (Ongoing) Sickness Absence Process Audit undertaken by Scotland Government, development of action plan once outcomes received. (Ongoing) Discovery process being carried out to establish reasons for sickness absence to inform organisational, health and wellbeing plans (Complete). Recommencement of the management of sickness absence cases through the application of the 'Once for Scotland' policies. (Complete) E-learning module in place for managers in relation to staff attendance management (Ongoing) Development of a Supervisory Training Programme for all managers (Ongoing)	16	12	8 ↓	30/03/2022
6	RPND/ 039309	30/09/2020	Clinical Governance Committee	Planning & Performance Committee	There is a risk that without clear and consistent messaging, the public and partners perceive any negative feedback 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 will not change, admissions to ED/waiting rooms not reduced/managed. NHS 24's reputation would be negatively damaged across the public and national partners.	Director of Service Development	Reduce	The national level communications on this pathway have yet to go live. On-going reporting and engagement through national workstream and NHS 24 Programme Board. NHS 24 will mitigate against this risk prior to July 2021. (Ongoing) . Consistent, effective national communication about new pathways is ongoing prior to national full scale launch (Ongoing) . Consistent communications and management from health and care partners (Ongoing) Managing engagement and expectations of public (Ongoing). .	16	12	6 ↓	30/07/2021
7	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 the protracted response to COVID-19.	Staff feel unsupported and sickness absence rates increase as a result	Director of Workforce	Reduce	Staff wellbeing work stream in place. A group is established to support the management/co-ordination of activity. The information feeds into the IMT (Complete). Implementation of the Wellbeing Strategy, Framework and action plan developed to support staff across a number of areas (Ongoing). Review and update on-line information and support available for staff (Ongoing) Staff have access to National Track & Trace resource (Ongoing) Communication action plan developed for wellbeing of staff (ongoing). COVID-19 Vaccination Programme ongoing, with second dose being delivered (Ongoing).	12	12	4 ↔	30/09/2021

#	ID	Date	Committee 1	Committee 2	Risk Description	Consequence	Owner	Action	Controls					Review Date
8	RPND/ 025796	31/08/2016	Planning & Performance Committee	Clinical Governance Committee	There is a risk that NHS 24 is vulnerable to a successful phishing or malware attack if the full range of possible control measures are not being fully utilised.	Resulting in the introduction of malware to the estate which could directly compromise the integrity, availability or confidentiality of the data held by the organisation and potentially cause significant disruption to the delivery of services. Secondary impact would be the associated damage to the reputation of the organisation.	Chief Information Officer	Reduce	The actions listed here are intended to reduce the Likelihood (L) and potentially the Consequences (C) of this risk being realised. The actions ▓▓▓ open are: ▓▓▓▓▓▓▓▓▓▓▓▓▓▓ ▓▓▓▓▓▓▓▓▓▓▓ ▓▓▓▓▓▓▓▓▓▓ The above controls are subject to the Connect phase approval and completion. Any additional controls considered and will be taken into account as an option within the Connect programme.	12	12 ⟷	8		31/08/2021

REDUCED RISKS

#	ID	Date	Committee 1	Committee 2	Risk Description	Consequence	Owner	Action	Controls					Review Date
9	RPND/ 038263	10/04/2020	Staff Governance Committee	Clinical Governance Committee	There is a risk that contact centre infection control will be a challenge during the COVID-19 response due to call centre configuration and the 2m social distancing recommendations for non-health care settings.	Increased Infection Control Rates. Increased sickness absence and anxiety amongst staff	Director of Nursing & Care	Reduce	Early release and ongoing review of guidance on infection control mechanisms in response to SG guidance (Ongoing) Robust Infection control processes in place including: - Robust cleaning regimes in place (Complete); - Ventilation and barriers/dividing boards in place, zoning, signage and face covering guidance for staff, FR Type 2 masks for clinical supervisors (Ongoing). - Procurement and installation of Anti-microbial products such as pure-hold handle and push pad covers, the purchase of sensor activation equipment i.e. sensor activated hot water urns (complete) - Tracking and tracing of people through NHS 24, making use of facilities such as seat booking systems to enhance track and trace, on call arrangements in place (complete) - Daily Service Support team environment checks to ensure adherence to measures Engagement with NSS at a senior level to ensure provision of ample wipes, hand wash and masks (Ongoing) - Vaccination programme (due for completion 25/02/2021) - Support and engagement with Trade Unions (Ongoing). - LFD Testing improvement plan in place (review 30/06/2021) New sites identified to accommodate social distancing and increased staffing levels. (Complete) - Outbreak process implemented and tested (Complete). - Weekly Communications Meetings in place in relation to IPC arrangement across all NHS 24 Estates. (Ongoing) - Development of quarterly IPC reporting (Ongoing)	20	8 ⬇	4		30/09/2021
10	RPND/ 039245	21/09/2020	Planning & Performance Committee	Audit & Risk Committee	There is a risk that the estates strategy does not align to the rapidly developing needs and priorities of NHS 24 due to the unprecedented and rapid response to the current pandemic; uncertainty in relation to future service demand once Urgent Care communications campaign is fully implemented, and decisions required in next 12 months in relation Cardonald, Norseman, Clydebank and Lightyear buildings	NHS 24 could have too large or too small an estate if decisions made at a point in time are superseded by external developments	Director of Finance	Reduce	Ensure decisions on estates are aligned to strategic priorities (Ongoing). Estates Programme Board in place which has contributors from each Directorate (Complete). Estates Programme Board workshops for reviewing estate strategy have commenced(Ongoing) Ensure flexibility via lease length and liaison with other Public Sector organisations (Ongoing)	9	9 ⬇	3		31/08/2021

CLOSED RISKS

| 11 | RPND/ 030229 | 10/10/2017 | Staff Governance Committee | Planning & Performance Committee | There is a risk that NHS 24 fail to realise the long term benefits of delivering a sustainable shift review which better aligns staff deployment to demand while meeting the needs of the service. | Increase operational challenge associated with operating technology system.

Increased cultural issues associated with lack of teaming approach on front-line.

Challenging performance and workforce planning which may impact service levels and cost. Limits ability of NHS 24 to deliver desired outcomes from strategic delivery plan. | Director of Service Delivery | Reduce | Complete evaluation of phase 1 of the shift review programme. This is currently being undertaken by the quality improvement team. In partnership the outputs will be considered and an agreed approach and timeline for phase 2 will be undertaken (ongoing)

Agreed approach to flexible working requests to be put in place (Ongoing)

Rotas identified by the shift review need to inform the recruitment process (Ongoing)

Outcome of appeals will determine further mitigation measures (ongoing)

Ensure staff time for development is fully protected and a culture of learning is embedded (Ongoing)

Shift review aligned to Better Working, Better Care clinical supervision test of change (Complete).
Modelling option being developed by NHS 24 ███████████ (Complete).
The outputs from the staff engagement are being used to inform the modelling of options (Complete).
Ensure robust communication plan in place including staff survey, off-line time for staff to attend focus groups. (Complete)
All stakeholders are engaged and informed at all stages of the review (Complete).
Commitment of resources to the Project to develop the full scope of outputs (Complete).
Head of Integrated Service Delivery has been appointed (Complete). | 12 | 8 | 6 | 31/06/2021 |