



**NHS 24
20 JUNE 2024
BOARD MEETING
ITEM NO 8.2
FOR ASSURANCE**

RISK MANAGEMENT UPDATE

Executive Sponsor: John Gebbie, Director of Finance

Lead Officer/Author: Linda Robertson, Risk & Resilience Manager

Action Required: The Board is asked to take assurance from the Risk Management process, review the presented Corporate Risk Register and provide feedback.

Key Points for this Committee to consider

The Board are presented with all current corporate risks scoring 10 and above (12 in total).

Since previously presented to the Board on 29 February 2024, the key changes are as follows:

- There are currently 36 corporate risks on the corporate risk register in total, compared to 31 previously reported.
- 6 risks have been closed.
- 11 new risks identified.
- 2 risks have reduced in score.
- 1 risk has increased.

Governance process

Before presenting to the Board, all risks have been reviewed and updated at the appropriate forums as follows:

24/04/24: EMT Risk & Opportunities Group
09/05/24: Staff Governance Committee
16/05/24: Planning & Performance Committee
21/05/24: EMT Business Meeting
23/05/24: Clinical Governance Committee
06/06/24: Audit & Risk Committee

Strategic alignment and link to overarching NHS Scotland priorities and strategies

This paper provides assurance to the Board that there is an effective risk management process in place to support delivery of key strategic priorities and supporting documentation below:

- NHS 24 Strategy

- Annual Delivery and Medium Term Plans
- Key Scottish Government Ministerial Priorities
- NHS 24 Realistic Medicine Framework

Strategic alignment and link to Corporate Delivery Plan activity

The Corporate Delivery Plan has been submitted to Scottish Government and feedback is awaited.

Key Risks

Organisational 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 be assured by the risk management update presented and provide feedback.

2. TIMING

- 2.1 There are no timing issues associated with this paper.

3. BACKGROUND

- 3.1 The Audit and Risk Committee, in line with its Terms of Reference, has the delegated authority of the NHS 24 Board to monitor the effectiveness of risk management arrangements, to assess and manage risk and provide the Board with assurance in this regard. This paper and risk register were presented to the Committee on 6 June 2024.

4. RISK MANAGEMENT UPDATE

- 4.1 This paper provides an update on all corporate risks as at 10 June 2024. The attached risk register details all corporate risks scoring 10 and above.
- 4.2 There are currently 36 corporate risks in total compared to 31 previously reported, key changes are as follows:
- 6 risks have been closed.
 - 11 new risks have been identified.
 - 2 risks have reduced in score.
 - 1 risk has increased in score.

- 4.3 Since previously reported, the Board has approved the Financial Plan 2024/25 and Annual Delivery Plan, the Executive Management Team have considered the risks to delivery of these plans and key programmes of work, with a number of new risks developed and set out in Section 5 below.
- 4.4 Following discussions at the Strategic Delivery Group (SDG), it has been agreed that this Group will provide an overview of risks relating to key programmes of work and consider their accumulative effect. It is important that the SDG does not replicate the work of the programme of works, who will be reviewing their own risks, but will consider the cumulative risks from each programme to ensure that mitigations are in place from an organisation wide viewpoint.
- 4.5 The Board is reminded that in line with its work plan, the Board will be presented with all corporate risks and not just those scoring 10 and above at its next meeting. An update will also be provided at the next meeting in terms of risk management planning and assurance.

5. RISK SUMMARY

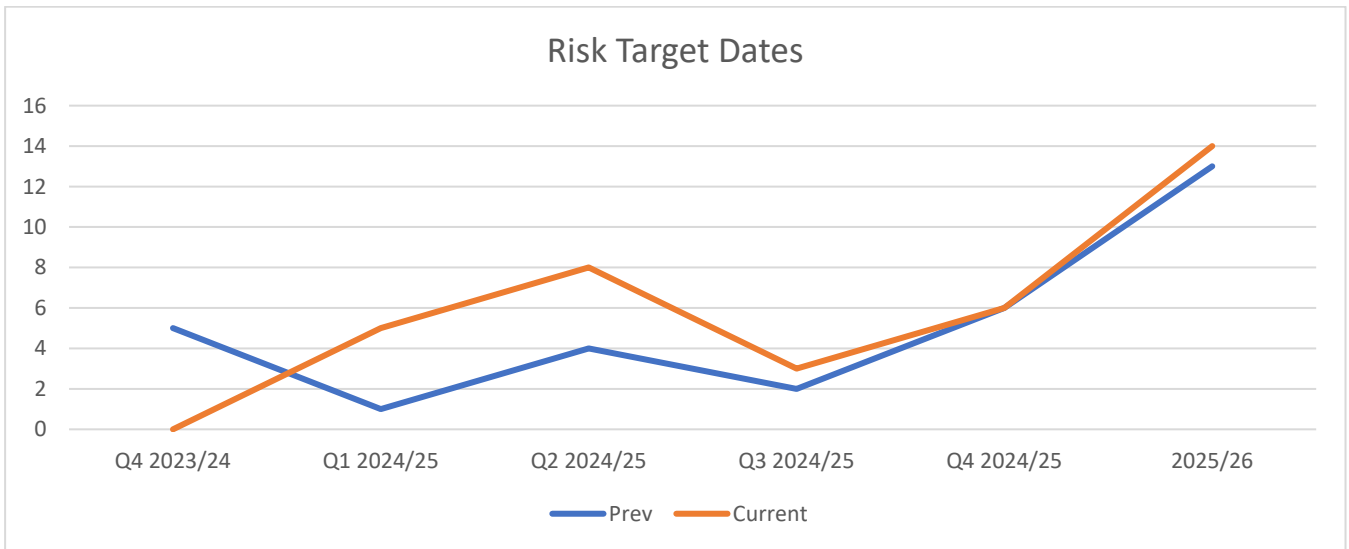
- 5.1 The risk profile (figure 1), provided in the form of a heat map below, highlights the current position of all corporate risks.

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)	1 (0)	0 (0)	0 (0)	1	<i>(1)</i>
	Major	4	-	11 (6)	9 (6)	2 (2)	0 (1)	22	<i>(15)</i>
	Moderate	3	0 (0)	4 (7)	7 (4)	0 (0)	0 (1)	11	<i>(12)</i>
	Minor	2	-	0 (0)	1 (2)	1 (1)	0 (0)	2	<i>(3)</i>
	Negligible	1	-	-	-	-	-		<i>(0)</i>
Total			0	15	18	3	0	36	
<i>Prev Score</i>			<i>(0)</i>	<i>(14)</i>	<i>(12)</i>	<i>(3)</i>	<i>(2)</i>		<i>(31)</i>

5.2

Figure 2. Target Dates

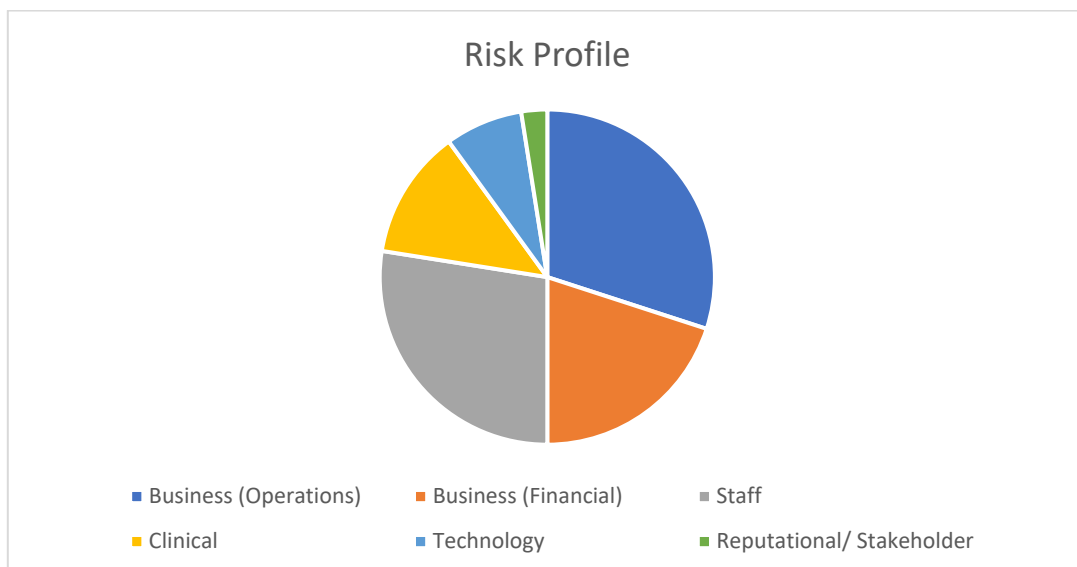


	Q4 2023/24	Q1 2024/25	Q2 2024/25	Q3 2024/25	Q4 2024/25	2025/26
Prev	5	1	4	2	6	13
Current	0	5	8	3	6	14

We previously reported 5 risks with target dates of Q4 2023/25, of those 5 risks, 4 have been closed. The target date for risk RI-0005754 (There is a risk that clinical governance and patient experience processes are compromised due to the limited functionality/workarounds of the current Incident Management System and the reduced number of users) has been extended to Q2 2024/25 to allow for the bedding in and completion of the training plan for the newly implemented Incident Management System.

Since previously reported, we have seen an increase in risks with target dates in Q1 2024/25 from 1 to 5, this is due to four of the new risks having target dates in Q1 2024/25.

5.3 Current Risk Profile/Type is set out below in Figure 3



NHS 24 OFFICIAL

	Business (Operations)	Business (Financial)	Staff	Clinical	Technology	Reputational/ Stakeholder`
Prev	8	3	12	4	3	1
Current	11	8	7	5	3	2

5.4 New Risks

Since previously reported, 11 new risks have been raised as follows:

RI-0004336: There is a risk that NHS 24 may be challenged to respond to exceptional peak winter 24/25 pressures while delivering the Digital and Service Transformation Strategic programmes of work. This risk currently scores 12 (4x3) and Planning and Performance is the Primary Governance Committee.

RI-0004342: There is a risk that NHS 24 do not effectively plan for the handover and exit strategy of key technology contracts. This risk currently scores 12 (4x3) and Planning and Performance is the Primary Governance Committee.

RI-0004725: There is a risk that Scottish Government are unable to fund the full allocations to NHS 24 due to wider Health and Social Care financial pressures. This risk currently scores 12 (4x3) and Planning and Performance is the Primary Governance Committee.

RI-0004728: There is a risk that NHS 24 are unable to make challenging financial decisions due to competing political priorities. This risk currently scores 12 (4x3) and Planning and Performance is the Primary Governance Committee.

Ri-0004726: There is a risk that long term outward secondees return to the organisation placing additional staffing cost pressures if funding ceases at their current place of employment. This risk currently scores 9 (3x3) and Planning and Performance is the Primary Governance Committee.

RI-0004727: There is a risk that pay award implications are not fully funded with no inclusion in this plan of the proposed 36 hour working week. This risk currently scores 9 (3x3) and Planning and Performance is the Primary Governance Committee.

RI-0004567: There is a risk the NHS 24 Workforce Management (WFM) system will be unsupported for an extended period beyond contract expiry date until data is transferred to the replacement WFM system if planned go live is delayed. This risk currently scores 8 (4x2) and Planning and Performance is the Primary Governance Committee. It is expected that the WFM system will have gone live by the Committee however, this risk will remain open until the conclusion of the system early life support has ended with no significant issues identified.

RI-0004625: There is a risk that an ongoing error with the automated call number update within the frontline call management system, patient records do not have the correct telephone number attached to correct record. This risk currently scores 8 (4x2) and Clinical Governance is the Primary Governance Committee.

RI-0004682: There is a risk that the savings and efficiency plans set out in the approved financial plan for 2024/25 are not delivered to the required timelines. This risk currently scores 8 (4x2) and Planning and Performance is the Primary Governance Committee.

RI-0004685: There is a risk that increases in inflation rates or changes to planning assumptions may place additional pressures on NHS 24 that will require further savings. Inflation links to the costs of the current managed service provider contracts. This risk currently scores 8 (4x2) and Planning and Performance is the Primary Governance Committee.

RI-0004345: There is a risk that NHS 24 training capacity and capability is not sufficient to manage BAU training operations and national delivery of new programmes. This includes the practice education contribution to Service and Digital transformation. This risk currently scores 8 (4x2) and Planning and Performance is the Primary Governance Committee.

5.5 Closed Risks

Since previously reported, six risks have been closed as follows:

RI-0003928: There is a risk that if approved, the planning application submitted by the landlord of the Dundee Centre for part change of use to student accommodation will negatively impact service provision and staff. Planning Permission for the Dundee centre submitted by the landlord has now been approved and therefore this is no longer a risk but an issue and therefore the EMT Risks & Opportunities Group approved this risk for closure. However, further information on the landlord's future plans now planning permission has been granted is awaited, and once this information is available, any future risks will be considered.

RI-0003940: There is a risk that the recurring aspirations of the directorates may not be able to be met due to the financial constraints on the organisation while savings plans require to be identified to get back to recurring financial balance. Mitigations for this risk were complete and this risk was approved for closure by the EMT Risks & Opportunities Group at its meeting on 24th April. Risk RI-0004729 was developed to reflect the in-year risk for 2024/25.

RI-0003951: There is a risk that reporting against KPI framework measures will be adversely impacted with implementation of Virtual Queue. All measures relating to time (Median Time to Answer, 90th Percentile TTA, Discontinued Calls, Patient Journey Time) cannot be measured on calls which select ringback option. Mitigating actions complete and software fix implemented and monitored to confirm successful. Risk approved for closure by EMT Risk & Opportunities Group 24 April 2024.

RI-0003961: There is a risk that the unpredictability of any infections (including COVID-19, norovirus) may have a significant impact on the delivery of services due to increased staff absence rates. This risk was endorsed for closure by the Area Health & Safety Committee on 15 April 2024 and approved at the EMT Risks & Opportunities Group on 24 April 2024. All mitigating actions have either been completed or are incorporated into business as usual processes as

ongoing controls. Infection prevention control continues to be a focus for the organisation and is closely monitored.

RI-0003967: There is a risk that the air conditioning unit at Lumina fails completely due to additional system pressure caused by ongoing intermittent fault. This risk was approved for closure by the EMT Risks & Opportunities Group following identification and rectification of the fault.

RI-0003968: 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. Risk approved for closure following completion of mitigating actions and approved for closure by EMT Risks & Opportunities Group.

5.6 **Reduced Risks**

Since previously reported, two risks have reduced in score as follows:

RI-0004729: There is a risk that the recurring aspirations of the organisation cannot be met due to financial constraints. The national position for 2024/25 requires Boards to meet higher savings targets and plan for 0% non-pay uplifts. Due to the uncertainty of the current financial climate and the need for efficiency plans to breakeven, this risk was opened and reported to the last Committee with a score of 20. However, the approval by the Board and SCHSCD of the Financial Plan for 2024/25 and progress in financial planning has reduced this score from 20 to 12.

RI-0003937: There is a risk that NHS 24 would not be able to sustain a safe and effective response due to significant and prolonged surge in demand caused by unforeseen circumstances or events. This risk previously scored 12 and has now been reduced to 8. This is due to progress in relation to performance improvement initiatives, progress in the development of scope and workstreams for the Service Transformation Programme and call handler resource currently being at establishment.

5.7 **Increased Risks**

RI-0003979: There is a risk that NHS 24's information assets or technology systems are lost or compromised due to a successful malicious cyber-attack or data breach by an individual or organisation attempting to gain access to technology network/infrastructure, corrupt data or steal confidential information. The score for this risk has increased from 10 (5 impact x 2 likelihood) to 15 (5 impact x 3 likelihood) due to a change and increased activity in the current environment.

6. **PROGRAMME RISKS**

- 6.1 Governance is in place to manage the key strategic programmes within NHS 24. The Strategic Delivery Group provide oversight to the progress in this area. Risks have been identified to ensure alignment of key areas of work within this. These will be reported through the appropriate Committees moving forward.

- 6.2 NHS 24 has a Climate Emergency and Sustainability Programme in place which provides a focus on the risks in this area and work is ongoing to consider any impact of the recent Scottish Government change in targets. At present risks are being managed at a programme level and will be escalated to the corporate risk register as appropriate in line with existing processes.

NHS 24
CORPORATE RISK REGISTER (Correct as 27/05/2024)

Case Ref	RI-0003927
Risk Register	Workforce
Receipt Date	09/04/2020
Primary Governance Committee	Staff Governance
Secondary Governance Committee	Clinical Governance
Description	<p>Workforce Strategy Priority 1: Sustainable Workforce</p> <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, meet the duty outlined in the Health and Care Staffing Act (Scotland) (2019) to ensure appropriate staffing and develop new and improved ways of working.</p>
Significant Impact	Prolonged waits to access services resulting in poor patient experience and reputational damage. Impacts negatively on staff morale, retention and wellbeing.
Executive Risk Owner	Director of Workforce
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions Ongoing</p> <ul style="list-style-type: none"> •Implementation of Wellbeing and Attendance Improvement Plan (regular updates being monitored by Staff Governance Committee). •Increased Formal Attendance Meetings to support line managers in managing attendance of their staff, signalling expectations to staff of the importance to attend work •Health & Wellbeing initiatives for staff to support by providing positive working environment, occupational health services and one to one support •Ongoing support for managers through Management Essentials and Leadership & Development Programmes <p>End of Year 1 Risk Mitigations (30th Oct 2023) Target <9% (As of 30/09/23 8.39%)</p> <ul style="list-style-type: none"> • Actions moved to complete, or if outstanding to Year 2 <p>End of Year 2 Risk Mitigations (30th Oct 2024) Target <8.5%</p> <ul style="list-style-type: none"> • Introduce case management KPIs • Procure case management system to report on KPI's - Case Management module procurement in progress •Review of Attendance and Wellbeing Action Plans •Extraction of Wellbeing Team Managers by Service Delivery, with all levels of line management taking full ownership of attendance management •Introduction of home (Remote) working for frontline by Service Delivery •Continuation/enhancement of existing management development and support for managers <p>End of Year 3 Risk Mitigations (30th Oct 2025) Target score <7%</p> <ul style="list-style-type: none"> •Continuation/enhancement of existing management development and support for managers •Evaluate and Review impact of Attendance and Wellbeing Action plans on Attendance Management <p>Key Risk Indicators</p> <ul style="list-style-type: none"> •Absence levels •% of managers trained in accessing and applying relevant policies and procedures
Previous Score (AxB)	16
Current Consequence (A)	Major (4)
Current Likelihood (B)	Likely (4)
Current Score (AxB)	16
Target Score (AxB)	8
Target Date	31/10/2025

Case Ref	RI-0003979
Risk Register	ICT
Receipt Date	04/12/2023
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Clinical Governance
Description	There is a risk that NHS 24's information assets or technology systems are lost or compromised due to a successful malicious cyber attack or data breach by an individual or organisation attempting to gain access to technology network/infrastructure, corrupt data or steal confidential information.
Significant Impact	Compromised data or technology systems leading to disruption of service provision. Reputational damage.
Executive Risk Owner	Chief Information Officer
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions:</p> <ol style="list-style-type: none"> 1. Improve cyber awareness across the organisation by the development of education/awareness plan. (Ongoing -31/03/2025) 2. Incident response playbooks with regular testing in place. (Ongoing - 31/03/2025) . 3. Ongoing programme of cyber exercising and education (Ongoing - March 2025). 4. [REDACTED] <p>Ongoing Controls:</p> <ol style="list-style-type: none"> 1.Information Governance and Security Group, chaired by the Chief Information Officer, in place to: <ul style="list-style-type: none"> - monitor and manage operational cyber risks on a regular basis; - ensure compliance with Cyber Essentials and the Network and Information Systems Regulations 2018 (NIS-R) 2.Ongoing review and updating of software (Ongoing Control) 3.Enablement of appropriate protection and threat detection technologies (Ongoing Control) 4.Close monitoring of anti-malware/spoofing reporting (Ongoing Control)
Previous Score (AxB)	10
Current Consequence (A)	Extreme (5)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	15
Target Score (AxB)	5
Target Date	31/03/2025

Case Ref	RI-0004336
Risk Register	Service Delivery
Receipt Date	25/01/2024
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Clinical Governance
Description	There is a risk that NHS 24 may be challenged to respond to exceptional peak winter 24/25 pressures while delivering the Digital and Service Transformation Strategic programmes of work.
Significant Impact	This may result in key resources and subject matter experts being redirected from the design, build and testing of the new applications to support the delivery of patient care should there be a major outbreak of winter illness that NHS 24 require to lead on.
Executive Risk Owner	Director of Service Delivery
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions</p> <ol style="list-style-type: none"> 1. Winter planning commenced earlier than usual with contingency plans considered (Ongoing - November 2024). 2. Clear resource and capacity plans in place to support the service and deliver the Digital and Service Transformation Programmes. (May need to consider load balance resource for period of time.) (Ongoing - 31 July 2024) 3. Winter freeze clearly defined for the Digital Transformation programme which would allow clinical resource to support the service during peak festive period. (Ongoing) 4. Internal Audit Capacity review recommendations (Ongoing - 31 July 2024) 5. SPRA Process to align priorities and resource across Service Delivery. Confirm priorities with wider organisation and contribute to ADP plan. (Ongoing - 30 June 2024) 6. Performance Improvement Framework to be developed to focus initiatives and activity of Service Delivery (Ongoing - 31 July 2024) <p>Ongoing Controls</p> <ol style="list-style-type: none"> 1. Potential of call handlers safely closing calls fully achieved to allow call handlers to deal with most winter illness call types (Ongoing Control). 2. Patients referred to digital resources such as NHS inform and NHS 24 app. (Ongoing Control)
Previous Score (AxB)	NEW
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	6
Target Date	31/10/2024

Case Ref	RI-0004342
Risk Register	ICT
Receipt Date	25/01/2024
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Audit & Risk
Description	Contractual timings, handover and exit planning There is a risk that NHS 24 do not effectively plan for the handover and exit strategy of key technology contracts.
Significant Impact	This may result in dual running or unplanned costs
Executive Risk Owner	Chief Information Officer
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions - Ongoing</p> <ol style="list-style-type: none"> 1. Development of high level plans to establish milestones for contract handovers (Ongoing - July/Aug 24). 2. Ongoing review and monitoring of above by Digital Transformation Board (Ongoing - April 2025) <p>Ongoing Controls</p> <ol style="list-style-type: none"> 1. Programme governance in place to manage and monitor actions required to ensure a transition. (Ongoing Control) 2. Key stakeholder engagement. (Ongoing Control) 3. Requirements developed and new contract negotiations will consider the implications of potential delays. (Ongoing Control) Next mitigating actions will become clearer following the tendering stage.
Previous Score (AxB)	NEW
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	6
Target Date	01/04/2025

Case Ref	RI-0004729
Risk Register	Finance
Receipt Date	30/01/2024
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Audit & Risk
Description	There is a risk that the recurring aspirations of the organisation cannot be met due to financial constraints. The national position for 2024/25 requires Boards to meet higher savings targets and plan for 0% non pay uplifts. The financial uncertainty and need for efficiency plans to breakeven is on a significantly higher level than experienced by NHS 24 in recent years.
Significant Impact	Statutory duty to breakeven is not achieved if costs are not contained and required efficiency plans not enacted. Anticipated income allocations are not received due to changes in government priorities. Prolonged inflationary pressures impact on the purchasing power of existing funding.
Executive Risk Owner	Director of Finance
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions</p> <ol style="list-style-type: none"> 1. Earlier implementation of SPRA process for 2024/25 (Plans received in December 2023 for consideration in the 24/25 finance plan) 2. Detailed Savings plans agreed early for implementation as early as possible in the new financial year. 3. Clarification from Scottish Government on priorities and secured funding on recurring basis 4. Receipt of allocation letters early in the financial year for Redesign of Urgent Care and Mental Health Services with any funding reduction impact on performance understood and agreed <p>Mitigating Actions Complete</p> <ol style="list-style-type: none"> 1. Finance planning process is completed and agreed prior to the new financial year (First cut in January, with final concluded and approved by Board in March) (Complete) 2. Board approval and confirmation from Scottish Government on 3-Year Financial Financial Plan (Complete) <p>Ongoing Controls</p> <ol style="list-style-type: none"> 1. Budgetary reporting mitigates against unplanned overspend and allows virement of budgets in year to achieve best value (Ongoing Control) 2. EMT & Board providing leadership and decision making (Ongoing Control) 3. Process to monitor saving plans and generate new ideas in place through Sustainability and Value Group (Ongoing Control)
Previous Score (AxB)	20
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	6
Target Date	31/08/2024

Case Ref	RI-0004725
Risk Register	Finance
Receipt Date	27/02/2024
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Audit & Risk
Description	There is a risk that Scottish Government are unable to fund the full allocations to NHS 24 due to wider Health and Social Care financial pressures.
Significant Impact	NHS 24 is unable to meet its financial targets
Executive Risk Owner	Director of Finance
Strategy Type	Reduce
Mitigating Action	1. Confirmation and receipt of funding allocation from Scottish Government (Ongoing - 30/06/24) 2. In the event of any changes to funding assumptions and allocation undertake a review of performance and financial baseline with sponsor department colleagues (Ongoing - 30/06/24)
Previous Score (AxB)	NEW
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	4
Target Date	30/06/2024

Case Ref	RI-0004728
Risk Register	Finance
Receipt Date	27/02/2024
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Audit & Risk Committee
Description	There is a risk that NHS 24 are unable to make challenging financial decisions due to competing political priorities.
Significant Impact	NHS 24 will not be able to make financial and saving targets.
Executive Risk Owner	Director of Finance
Strategy Type	Reduce
Mitigating Action	1. Approval and sign-off of NHS 24 2024/25 Financial Plan by Scottish Government (Ongoing - 30/06/24) 2. NHS 24 shall ensure that there is robust data available to support any decisions made. (Ongoing Control)
Previous Score (AxB)	NEW
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	4
Target Date	30/06/2024

Case Ref	RI-0003932
Risk Register	Workforce
Receipt Date	12/04/2023
Primary Governance Committee	Staff Governance
Secondary Governance Committee	Planning & Performance
Description	Workforce Strategy Priority 4: Effective Leadership & Management There is a risk that leaders in the organisation are not sufficiently skilled to resiliently manage current complex organisational challenges or the change required to transform NHS 24 in line with the priorities contained in the Corporate Strategy 2023-28
Significant Impact	Leaders in the organisation are not equipped with the skills, resilience and behaviours required to transform the organisation per the Corporate Strategy 2023-28
Executive Risk Owner	Director of Workforce
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions Ongoing</p> <ul style="list-style-type: none"> •Undertake Talent Identification and Succession Planning process each year to identify nominations for national leadership programmes, identify top talent and develop for succession (Ongoing Control) <p>End of Year 1 Risk Mitigations (30th Oct 2023) >50% of eligible Managers on MEP</p> <ul style="list-style-type: none"> • Actions moved to complete, or if outstanding to Year 2 <p>End of Year 2 Risk Mitigations (30th Oct 2024) >90% of eligible Managers on MEP, > 40% of eligible Middle Managers and 40% of eligible Senior Leaders</p> <ul style="list-style-type: none"> •Continue to deliver Management Essentials Programme to all existing people managers up to and including Band 7 (Dec 2023) •Deliver Management Essentials Programme to new managers (Oct 2024) •Deliver Senior Leaders Programme to all in scope leaders (Oct 2024) •Deliver Executive Development Programme (Oct 2024) •Develop and implement NHS 24 Mentoring Programme (Oct 2024) <p>End of Year 3 Risk Mitigations (30th Oct 2025) 50% of eligible Middle Managers and 50% of eligible Senior Leaders</p> <ul style="list-style-type: none"> •Deliver Middle Leaders Programme to all in scope leaders (Oct 2025) •Deliver Management Essentials Programme to new managers (Oct 2025) <p>Key Risk Indicators:</p> <ul style="list-style-type: none"> •Appraisal Levels •Attrition Levels •Absence Levels •ER case numbers •Numbers attending Leadership Programmes •iMatter EEI Rating •iMatter Overall Experience Rating •Internal Mobility (Talent and Succession Planning)
Previous Score (AxB)	12
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	6
Target Date	31/10/2025

Case Ref	RI-0003944
Risk Register	Workforce
Receipt Date	12/04/2023
Primary Governance Committee	Staff Governance
Secondary Governance Committee	Planning & Performance
Description	Workforce Strategy Priority 2. Inclusive Culture There is a risk that without changing the current organisational culture, attrition will continue to rise, grievances levels will continue to be high and attendance levels challenging.
Significant Impact	Staff morale is impacted, wellbeing of staff is impacted and service pressure demands are exacerbated by increased absences. By improving the organisational culture, the above will be mitigated and NHS 24 will be recognised externally as an Employer of Choice.
Executive Risk Owner	Director of Workforce
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions Ongoing</p> <ul style="list-style-type: none"> •Culture Change Manager to attend Staff Experience Groups on a rolling basis to establish credibility and for increased visibility (Ongoing control) <p>End of Year 1 Risk Mitigations (30th Oct 2023) Target 26% (by attrition) (As of 30/09/23 - 21.04% attrition)</p> <ul style="list-style-type: none"> • Actions moved to complete, or if outstanding to Year 2 <p>End of Year 2 Risk Mitigations (30th Oct 2024) Target 24%</p> <ul style="list-style-type: none"> • Develop KPI's and Dashboard to track and monitor progress of Cultural Alignment Programme and link to Equality, Diversity and Inclusion, Wellbeing and Staff Engagement (Oct 2023) - KPI's developed, delay in dashboard design and will now be presented to Staff Governance in Feb 23 • Continue to deliver Culture Workshops/Targeted Interventions to raise awareness of new Values and Behaviours Framework (Oct 2024) • Deliver Cultural Alignment Programme Year 2 Actions (Oct 2024) <p>End of Year 3 Risk Mitigations (30th Oct 2025) Target 22% attrition</p> <ul style="list-style-type: none"> •Deliver Cultural Alignment Programme Year 3 Actions (Oct 2025) <p>Key Risk Indicators:</p> <ul style="list-style-type: none"> •iMatter Response Rate •iMatter EEI Score •iMatter Overall Experience Score •CCA Audit results •Absence Levels • Attrition Levels • Attrition Levels • Appraisal Levels
Previous Score (AxB)	12
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	6
Target Date	31/10/2025

Case Ref	RI-0003934
Risk Register	Service Delivery
Receipt Date	06/10/2023
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Staff Governance
Description	There is a risk that the benefits of the Shift Review, in particular the development of a team culture, are not fully realised without the successful culture change and bedding in of Phase II (manager/team alignment) of the shift review.
Significant Impact	Ability of NHS 24 to deliver desired outcomes from strategic delivery plan, negatively impacted. Increased cultural issues associated with lack of teaming approach on front-line. Reduction in staff morale if potential benefit not delivered.
Executive Risk Owner	Director of Service Delivery
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions</p> <ol style="list-style-type: none"> 1. Implementation of evaluation and development and analysis of outputs and recommendations once complete (Ongoing March 2025) 2. Assessment of implementation compliance across teams has identified some outliers in team alignment, operational oversight of Assistant Director to Resolve (Ongoing - April 2024) <p>Complete</p> <ol style="list-style-type: none"> 1. Development of scope for Evaluation by the QI Team (Complete) 2. Resource identified and establishment of timeline for duration of Evaluation (Ongoing December 2023) <p>Ongoing Controls</p> <ol style="list-style-type: none"> 1. Robust modelling in place to establish requirements, focusing on operational and managerial roles. (Ongoing Control) 2. Ongoing engagement and communication with managers and staff (Ongoing Control) 3. Monitoring and oversight of key staff KPIs through various BAU groups, staff surveys, iMatter (Ongoing Control)
Previous Score (AxB)	12
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	4
Target Date	31/03/2025

Case Ref	RI-0003916
Risk Register	Workforce
Receipt Date	12/04/2023
Primary Governance Committee	Staff Governance
Secondary Governance Committee	Planning & Performance
Description	Workforce Strategy Priority 1: Sustainable Workforce There is a risk that the steady increase in NHS24 staff turnover over the past 2 years continues, net gains are not realised and therefore target establishment levels are not achieved. High labour turnover rates have significant financial costs to the organisation, in addition to impacting staff morale and productivity.
Significant Impact	Negative impact on staff morale and productivity. Target establishment levels are not achieved.
Executive Risk Owner	Director of Workforce
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions Ongoing</p> <ul style="list-style-type: none"> •EMT and SGC receive a six monthly progress report including a deeper dive and an update on progress made against the improvement action plan •Retention strategy built into Workforce Strategy 20222025 •Reduced number of fixed term contracts and use of agency staff (Ongoing Control) <p>End of Year 1 Risk Mitigations (30th Oct 2023) Target 26%</p> <ul style="list-style-type: none"> • Attrition Improvement Plan – Phase 2 • Introduce opportunity for feedback on staff experiences throughout the first 12 months working at NHS 24 • Develop criteria for Rotational Posts where staff do a joint role with two boards then move to implement (June 2024) • Recruitment training for hiring managers developed and rolled out from August 2023 <p>End of Year 2 Risk Mitigations (30th Oct 2024) Target 24%</p> <ul style="list-style-type: none"> • Develop criteria for Rotational Posts where staff do a joint role with two boards then move to implement (June 2024) kick off meetings commenced in September 2023 • Attrition Improvement Plan Phase 3 • Implement a helicopter view of attrition from the road map identifying all the different areas to be incorporate into attrition analysis. • Introduction of home (Remote) working for frontline <p>End of Year 3 Risk Mitigations (30th Oct 2025) Target 22%</p> <ul style="list-style-type: none"> •Job rotation (opportunities to try something new) •Wider collaboration across the NHS in terms of sharing staff resources • % rolling turnover • stability index • Exit interview completion rates • New start satisfaction and recommending NHS 24 as a great place to work data <p>Key Risk Indicators</p> <ul style="list-style-type: none"> •% rolling turnover •stability index •Exit interview completion rates •New start satisfaction and recommending NHS 24 as a great place to work data
Previous Score (AxB)	12
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Target Score (AxB)	8
Target Date	31/10/2025