

<b>NHS Greater Glasgow and Clyde</b>	<b>Paper No. 24/158</b>
<b>Meeting:</b>	<b>NHSGGC Board</b>
<b>Meeting Date:</b>	<b>17<sup>th</sup> December 2024</b>
<b>Title:</b>	<b>Corporate Risk Register</b>
<b>Sponsoring Director/Manager</b>	<b>Colin Neil, Director of Finance</b>
<b>Report Author:</b>	<b>Katrina Heenan, Chief Risk Officer</b>

## 1. Purpose

**The purpose of the attached paper is to:**

Update Board members on, and provide assurance over, the Corporate Risk Register (CRR).

## 2. Executive Summary

The Corporate Risk Register (CRR) was last reported to the Board in June 2024 for the period January to May 2024. The Corporate Risk Register included in this paper reflects the period May to October 2024. Regular reviews of risks have taken place since and will continue to be presented in future updates.

The CRR is updated monthly via risk owners and the Corporate Management Team (CMT). Each risk is aligned to a standing committee with the risk register subject to regular review and scrutiny at the relevant standing committees to ensure:

- All relevant risks are identified
- Risks are clearly described in terms of risk description; risk cause; risk impact
- Risks are scored appropriately
- Mitigating actions are framed in SMART terms with clarity on how they will address the risks
- Alignment of risks to corporate objectives is appropriate
- Alignment of risk types is appropriate

The CRR will continue to be developed, reviewed and updated throughout the year via management meetings, Standing Committees and Board.

## BOARD OFFICIAL

Detailed Risk Review Meetings are ongoing with Risk Leads to fully review all aspects of the risk including controls, mitigation actions and risk score. The updated Risks are reported through each of the Committees for approval, to Audit and Risk Committee and then the Board for assurance. Over the last five months nine detailed reviews, in addition to monthly reviews, have been completed. This has resulted in three increases in risk score, four decreases in risk score and two risk scores have remained the same.

In addition following the monthly review the Cyber Risk score has been increased to reflect the ongoing internal and external level of risk associated with Cyber Risk.

One Risk has been escalated from Directorate level to Corporate level, taking the total number of Corporate Risks to twenty-two.

Full details of all risks, controls and actions have been presented to the appropriate Governance Committee and Audit & Risk Committee. The enclosed report details the corporate risk profile as submitted to the September and December Audit & Risk Committee.

Please refer to **Appendix A** for the Corporate Risk Register Update Report.

Please refer to **Appendix B** for the Corporate Risk Register.

### 3. Recommendations

The Board is asked to consider the following recommendations:

- To note the ongoing work of the Audit and Risk Committee and other standing committees in scrutinising, reviewing and updating the risk register and take assurance from that process.
- To review and accept the updated Corporate Risk Register.

### 4. Response Required

This paper is presented for approval.

### 5. Impact Assessment

The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:

- |                        |                 |
|------------------------|-----------------|
| • Better Health        | <u>Positive</u> |
| • Better Care          | <u>Positive</u> |
| • Better Value         | <u>Positive</u> |
| • Better Workplace     | <u>Positive</u> |
| • Equality & Diversity | <u>Positive</u> |
| • Environment          | <u>Positive</u> |

## **6. Engagement & Communications**

The issues addressed in this paper were subject to the following engagement and communications activity:

- The Corporate Risk Register is reviewed monthly by Risk Owners and their management teams.

## **7. Governance Route**

The content of this paper has been previously considered by the following groups as part of its development:

- CMT – monthly
- Audit and Risk Committee – 17<sup>th</sup> September 2024 and 3<sup>rd</sup> December 2024

## **8. Date Prepared & Issued**

4<sup>th</sup> December 2024

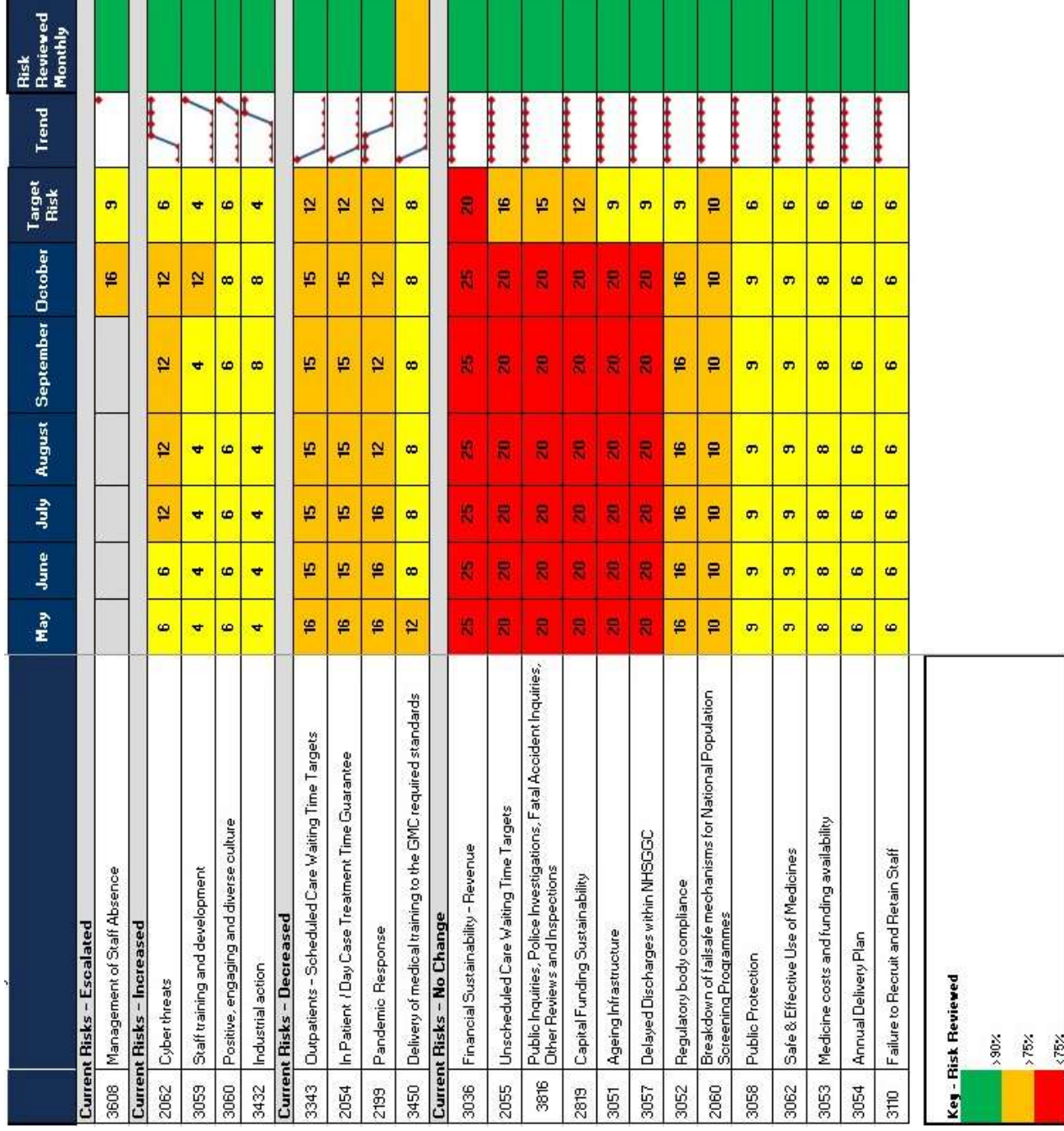
# Appendix A

## Corporate Risk Register Review

Reporting Period: May to October 2024

NHS Board: 17<sup>th</sup> December 2024

# Corporate Risk Dashboard



1

2

3

4

5

1

2

3

4

5

1

2

3

4

5

1

2

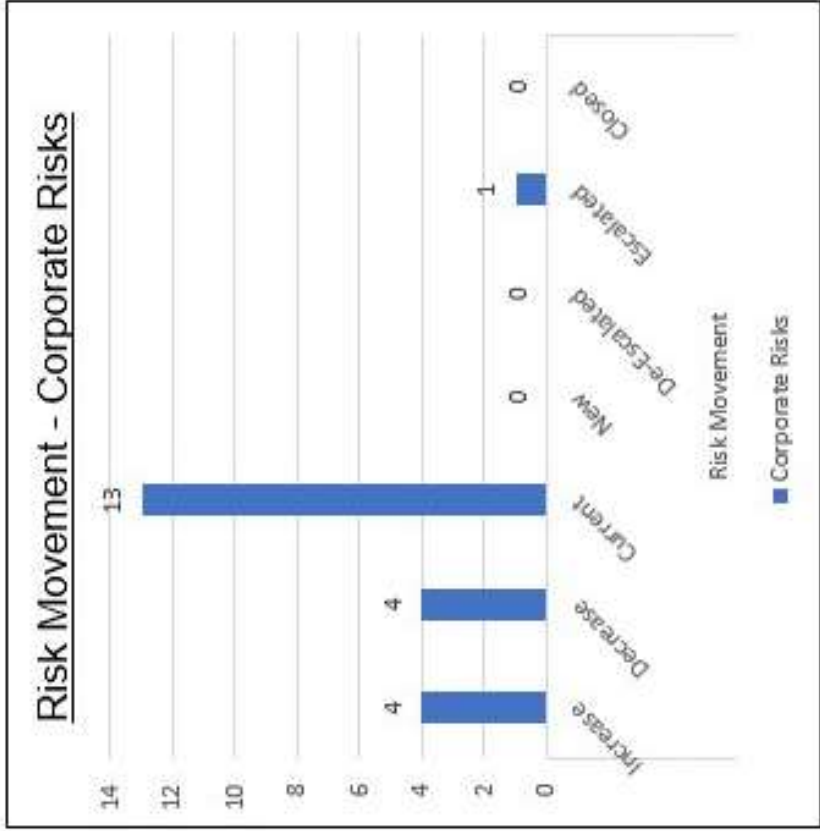
3

4

5

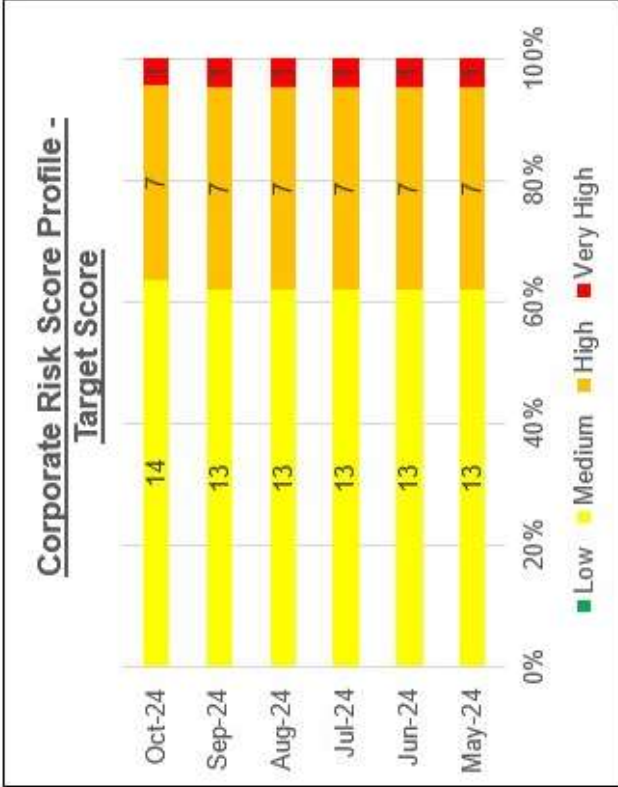
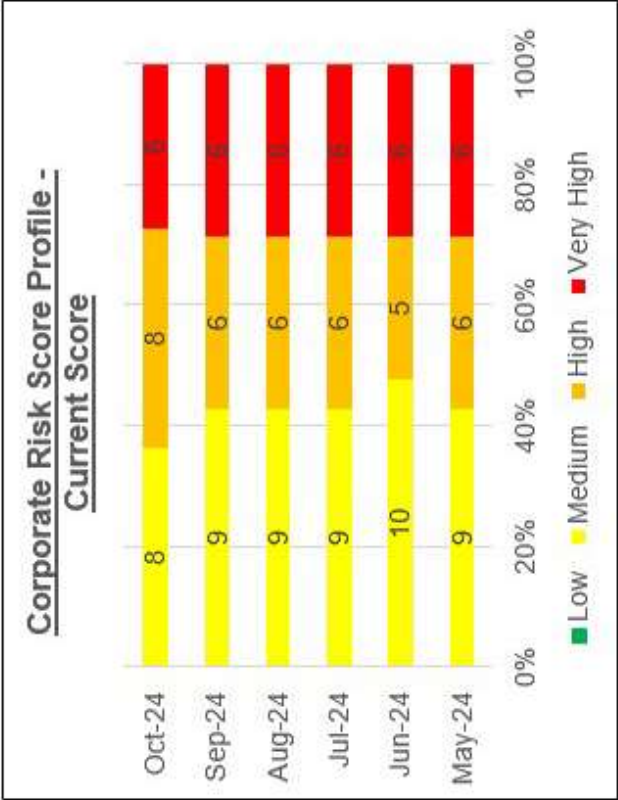
Note – Changes have been approved by Corporate Management Team on 7<sup>th</sup> November, however they are subject to Governance Committee approval.

# Corporate Risk Register - Analysis



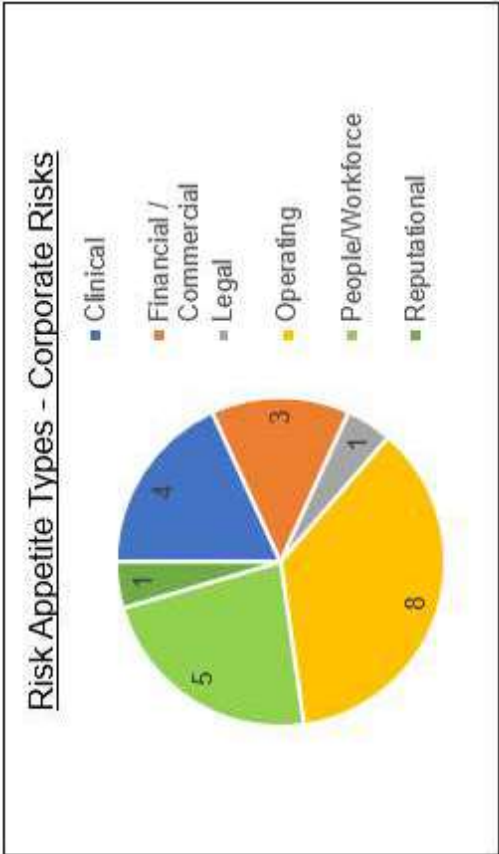
Corporate Risk Register – Movement in Risk Numbers		
Risk Movement	Total	Risk Titles
<b>No. of risks May 2024</b>	<b>21</b>	
Risks decreased in score	4	2199 – Pandemic 2054 – Inpatient/ Day Case Treatment Timer Guarantee 3343 – Outpatient – Schedule Care Waiting Time Targets 3450 – Delivery of Medical Training
Risks increased in score	1	2062 - Cyber Risk 3059 – Staff Training and Development 3060 - Positive, Engaging and Diverse Culture 3432 - Industrial Action
New or escalated risks	1	3608 – Management of Staff Absence
Closed or de-escalated risks	0	
<b>No. of risks October 2024</b>	<b>22</b>	

# Corporate Risk Register - Analysis



## Commentary

Risk Score Profile Charts provide comparison of current risk score profile and target risk score. The overall number of risks on the Corporate Risk Register is 22.



## Commentary

The chart provides a breakdown of corporate risks by risk type as defined in the Risk Appetite Statement.



# Corporate Risk Register - Analysis

Corporate Objectives		Risk Title	Current Score
Better Health	CO1 To reduce the burden of disease on the population through health improvement programmes that deliver a measureable shift to prevention rather than treatment	Breakdown of failsafe mechanisms for National Population Health Screening	10
	CO4 To ensure the best start for children with a focus on developing good health and wellbeing in their early years	Public Protection	9
Better Care	CO7 To provide a safe environment and appropriate working practices that minimise the risk of injury or harm to our patients and our people	Industrial action by staff impacting on care to patients	8
		Delivery of medical training to the GMC required standards	8
	CO8 To ensure services are timely and accessible to all parts of the community we serve	Safe and effective use of medicines	9
		In Patient / Day Case Treatment Time Guarantee	15
		Outpatients – Scheduled Care Waiting Time Targets	15
		Unscheduled care waiting time targets	20
		Public Inquiries, Police Investigations, Fatal Accident Inquiries and other Reviews and Inspections	20
	CO11 To shift the reliance on hospital care towards proactive and coordinated care and support in the community	Pandemic response	12
		Cyber Threats	12
		Delivery Plan	6
	Better Value	CO12 To ensure effective financial planning across the healthcare system that supports financial sustainability and balance budgets	Delayed Discharges within NHS GGC
Financial sustainability – revenue			25
CO15 To utilise and improve our capital assets to support the reform of healthcare		Medicines costs and funding availability	8
		Capital funding sustainability	20
Better Workplace	CO17 To ensure our people are treated fairly and consistently, with dignity and respect, and work in an environment where diversity is valued.	Ageing Infrastructure	20
		Regulatory body compliance	16
		Positive, engaging and diverse culture	8
	CO21 To promote the health and well-being of our people	Failure to recruit and retain staff	6
		Management of Staff Absence	16
CO22 To provide a continuously improving and safe working environment	Mandatory Staff training and development	12	



Risk ID	Title	Description	Risk Level - Current	Additional Mitigation Actions Identified and Ongoing	Risk Level - Target	Monthly Review Completed	Risk Owner	Risk Appetite	Assigned Governance Committee
3036	Financial Sustainability - Revenue	NHS Greater Glasgow and Clyde cannot achieve and maintain financial sustainability and / or cannot maintain current / expected levels of service provision due to financial challenges around delivery of the Financial Plan resulting from significantly higher than expected cost pressures above the allocated funding.	25 - Very High		20 - Very High	10/10/2024	Neil, Colin	Moderate	Finance, Planning and Performance Committee
2055	Urgent and Unscheduled Care Delivery	Failure to deliver Urgent and Unscheduled Care SG Standards and Targets as per the Annual Delivery Plan which impacts patient care	20 - Very High		16 - High	10/10/2024	Edwards, William	Open	Acute Services Committee
3816	Public Inquiries, Police Investigations, Fatal Accident Inquiries and other Reviews and Inspections	Public Inquiries, Police Investigations, Fatal Accident Inquiries and other Reviews and Inspections impacts on staff wellbeing, public confidence and service delivery.	20 - Very High		15 - High	10/10/2024	Vanhegan, Elaine	Moderate	Finance, Planning and Performance Committee
2819	Capital Funding Sustainability	The Board's required Capital Infrastructure Investment Programme becomes undeliverable in full and needs to be scaled back	20 - Very High		12 - High	10/10/2024	Neil, Colin	Moderate	Finance, Planning and Performance Committee
3051	Ageing Infrastructure	The ageing infrastructure across the estate will continue to raise operational and financial issues which could result in service disruption and impact on patient care	20 - Very High		9 - Medium	01/10/2024	Steele, Tom	Open	Finance, Planning and Performance Committee
3057	Delayed Discharges within NHSGGC	Unable to maintain whole system flow, which results in increased delayed discharges.	20 - Very High		9 - Medium	01/10/2024	Wallace, Angela	Open	Finance, Planning and Performance Committee
3052	Regulatory body compliance	Failure to achieve and maintain statutory compliance through regulatory bodies	16 - High		9 - Medium	01/10/2024	Steele, Tom	Cautious	Finance, Planning and Performance Committee
3608	Management of Staff Attendance	Failure to manage Staff Attendance levels in line with Policy impacts on staff wellbeing and service provision.	16 - High		9 - Medium	07/10/2024	MacPherson, Anne	Moderate	Staff Governance Committee
2054	In Patient / Day Case Treatment Time Guarantee (incl. 8 key diagnostic tests),	NHSGGC fails to deliver Inpatient / Day Case TTG targets to agreed ADP trajectories.	15 - High		12 - High	04/10/2024	McFadyen, Susan	Open	Acute Services Committee
3343	Outpatients - Scheduled Care Waiting Time Targets	NHSGGC fails to deliver Scheduled Care Waiting Time targets to agreed ADP trajectories.	15 - High		12 - High	04/10/2024	McFadyen, Susan	Open	Acute Services Committee
2199	Pandemic Response	Inability to respond effectively to a pandemic in order to provide healthcare service to patients.	12 - High		12 - High	01/10/2024	Crighton, Emilia	Open	Population Health and Wellbeing Committee
2062	Cyber threats	Cyber security of the organisation may be compromised and leave the organisation increasingly vulnerable to attack.	12 - High		6 - Medium	22/10/2024	Duncan, Tricia	Open	Information Governance Steering Group
3059	Mandatory Staff training and development	Failure to appropriately train and develop NHSGGC staff to enable individuals to deliver their role and responsibilities safely.	12 - High		4 - Medium	09/10/2024	MacPherson, Anne	Moderate	Staff Governance Committee
2060	Breakdown of fallback mechanisms for any National Screening Programmes	Breakdown of fallback mechanisms for any National Population Screening Programmes, that could lead to delayed diagnosis/ treatment.	10 - High		10 - High	01/10/2024	Crighton, Emilia	Moderate	Population Health and Wellbeing Committee
3058	Public Protection	Breakdown in Public Protection Procedures and Processes	8 - Medium		6 - Medium	02/10/2024	Wallace, Angela	Moderate	Clinical and Care Governance Committee
3062	Safe & Effective Use of Medicines	Preventable patient and organisational harm from the use of medicines	8 - Medium		6 - Medium	22/10/2024	Armstrong, Jennifer	Moderate	Clinical and Care Governance Committee
3450	Delivery of medical training to the GMC required standards	Units / Departments do not meet the required GMC standards of training, such that the unit is escalated to enhanced monitoring status.	8 - Medium		8 - Medium	12/09/2024	Davidson, Scott	Moderate	Staff Governance Committee
3053	Medicine costs and funding availability	Overall medicines costs for NHS Greater Glasgow and Clyde are unsustainable in the future	8 - Medium		6 - Medium	22/10/2024	Davidson, Scott	Moderate	Finance, Planning and Performance Committee
3060	Positive, engaging and diverse culture	Failure to develop and maintain a positive, engaging and diverse culture in which staff are treated fairly, consistently with dignity and respect, in line with NHS Scotland values.	8 - Medium		6 - Medium	09/10/2024	MacPherson, Anne	Moderate	Staff Governance Committee
3432	Industrial action	Industrial action that results in major disruption to service	8 - Medium		4 - Medium	08/10/2024	MacPherson, Anne	Moderate	Staff Governance Committee
3110	Failure to Recruit and Retain Staff	Failure to recruit and retain staff members to all areas resulting in reduced capacity	6 - Medium		6 - Medium	02/10/2024	MacPherson, Anne	Moderate	Staff Governance Committee
3054	Annual Delivery Plan	There is a risk that NHS Greater Glasgow and Clyde will be unable to deliver on the commitments in our annual Delivery Plans in a structured, controlled manner and within required timescales.	6 - Medium		6 - Medium	04/10/2024	Davidson, Scott	Open	Finance, Planning and Performance Committee