

NHS Greater Glasgow and Clyde	Paper No. 25/157
Meeting:	NHSGGC Board Meeting
Meeting Date:	18 December 2025
Title:	Corporate Risk Register
Sponsoring Director:	Michael Breen, Director of Finance
Report Author:	Katrina Heenan, Chief Risk Officer

1. Purpose

The purpose of this 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 October 2025. The Corporate Risk Register included in this paper reflects the period September to October 2025. 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
- Alignment of risks to corporate objectives is appropriate
- Alignment of risk types is appropriate

The information within this paper has been provided for noting prior to subsequent review and approval at Governance Committees. The CRR will continue to be developed, reviewed and updated throughout the year via management meetings, Standing Committees and Board.

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 note the updated Corporate Risk Register pending the approval through Corporate Management Team and Governance Committees.

4. Response Required

This paper is presented for assurance.

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

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:

- Finance, Planning and Performance Committee 11 October 2025
- Corporate Management Team 3 November 2025
- People Committee 20 November 2025
- Audit and Risk Committee 2 December 2025
- Clinical Care and Governance Committee 4 December 2025

8. Date Prepared & Issued

Date prepared: 24 November 2025

Date issued: 10 December 2025

Corporate Risk Register Review

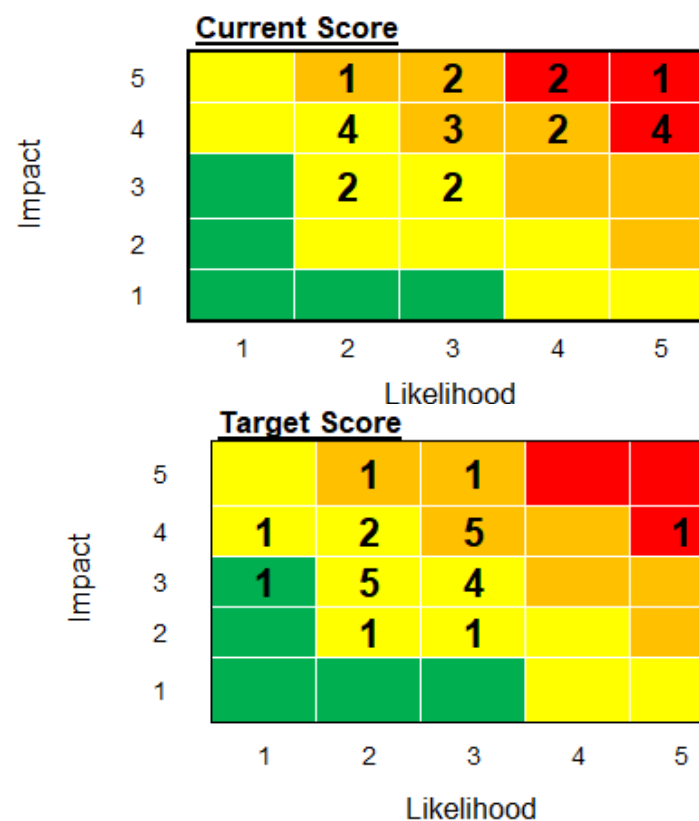
Reporting Period: September to October 2025

NHSGGC Board: 18 December 2025

Corporate Risk Dashboard

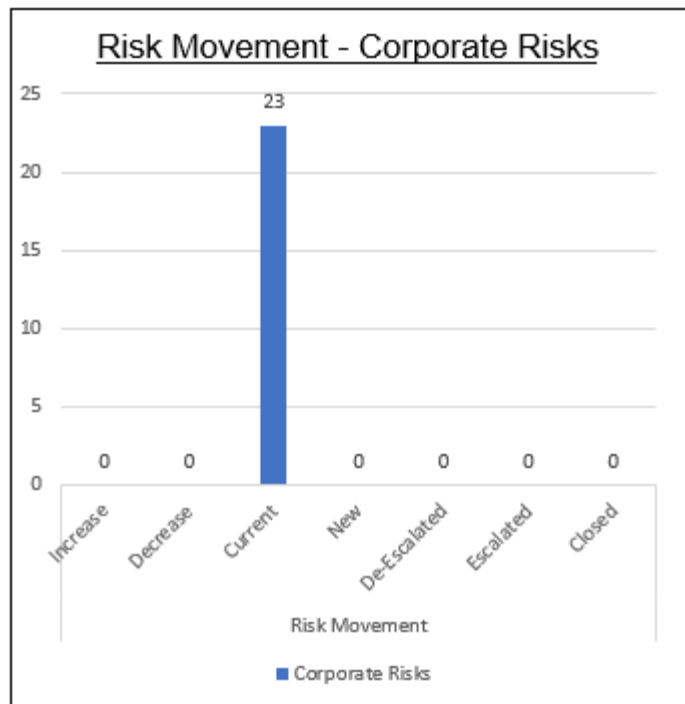
ID	Risk Title	Sept	Oct	Target Risk Score	Trend	Risk Reviewed in Month
Current Risks – No Change						
3036	Financial Sustainability – Revenue	25	25	20		
3816	Public Inquiries, Police Investigations, Fatal Accident Inquiries, Other Reviews and Inspections	20	20	15		
2819	Capital Funding Sustainability	20	20	12		
2055	Unscheduled Care Waiting Time Targets	20	20	12		
3057	Delayed Discharges within NHSGGC	20	20	9		
3051	Ageing Infrastructure	20	20	9		
4035	Climate Change & Sustainability Strategy	20	20	9		
3052	Regulatory body compliance	16	16	3		
3608	Management of Staff Absence	16	16	9		
2054	In Patient / Day Case Treatment Time Guarantee	15	15	12		
3343	Outpatients – Scheduled Care Waiting Time Targets	15	15	12		
2199	Pandemic Response	12	12	12		
2062	Cyber threats	12	12	6		
3059	Mandatory Staff training and development	12	12	4		
2060	Breakdown of failsafe mechanisms for National Population Screening Programmes	10	10	10		
3058	Public Protection	9	9	6		
3053	Medicine costs and funding availability	9	9	6		
3450	Delivery of medical training to the GMC required standards	8	8	8		
3062	Safe & Effective Use of Medicines	8	8	8		
3060	Positive, engaging and diverse culture	8	8	6		
3432	Industrial Action	8	8	4		
3054	Annual Delivery Plan	6	6	6		
3110	Failure to Recruit and Retain Staff	6	6	6		

Month	Number of risks reviewed	Number of Corporate Risks	CRR Risks Reviewed in month %
Sept	21	23	91%
Oct	21	23	91%



Note – Risk Register has been presented to Corporate Management Team in November 2025, subject to Governance Committee approval.

Corporate Risk Register - Analysis



Corporate Risk Register – Movement in Risk Numbers

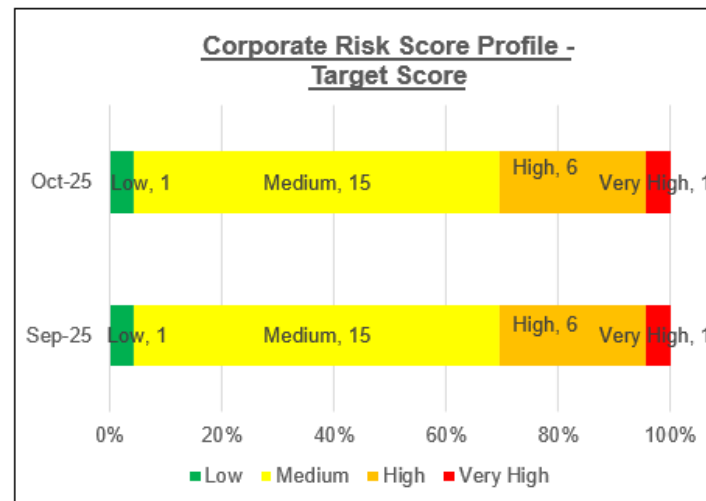
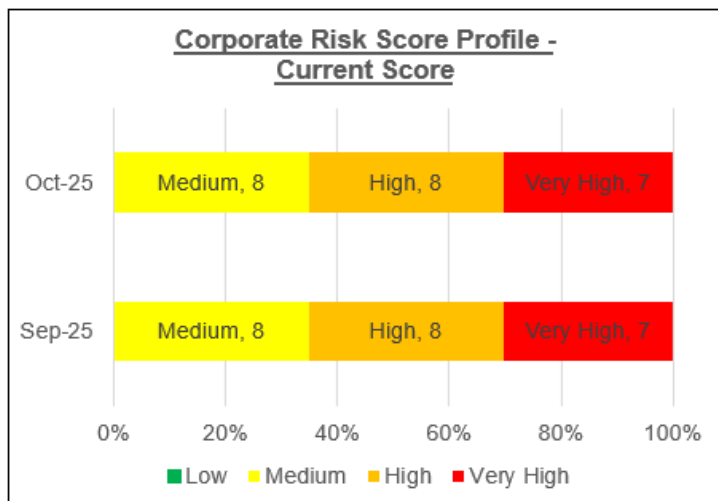
Risk Movement	Total	Risk Titles
No. of risks September 2025	23	
Risks decreased in score	0	
Risks increased in score	0	
New or escalated risks	0	
Closed or de-escalated risks	0	
No. of risks October 2025	23	

Commentary

The Corporate Risk Register comprises 23 risks.

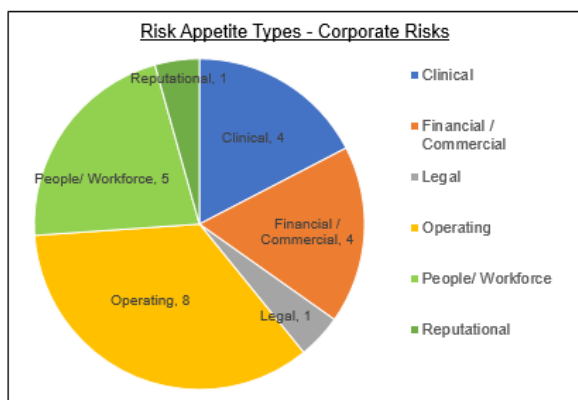
Corporate Risk Register - Analysis

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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 23.



Commentary

The chart above 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
			Safe and effective use of medicines	9
	CO8	To ensure services are timely and accessible to all parts of the community we serve	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
			Pandemic response	12
			Cyber Threats	12
			Delivery Plan	6
	CO11	To shift the reliance on hospital care towards proactive and coordinated care and support in the community	Delayed Discharges within NHS GGC	20
Better Value	CO12	To ensure effective financial planning across the healthcare system that supports financial sustainability and balance budgets	Financial sustainability – revenue	25
			Medicines costs and funding availability	8
	CO15	To utilise and improve our capital assets to support the reform of healthcare	Capital funding sustainability	20
			Ageing Infrastructure	20
			Regulatory body compliance	16
	CO16	To ensure NHSGGC provides services that are environmentally sustainable meeting targets and legislative policy to work towards achieving new zero by 2045.	Climate Change & 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.	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

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ID	Title	Description	Risk Score - Current	Risk Score - Target	Risk Owner	Risk Type	Risk Appetite	Assigned Governance Committee
			Risk level	Risk level				
3036	Financial Sustainability - Revenue	NHS Greater Glasgow and Clyde cannot achieve and maintain financial sustainability to deliver expected levels of service provision due to financial challenges around delivery of the Financial Plan.	25 - Very High	20 - Very High	Breen, Michael	Financial / Commercial	Moderate	Finance, Planning and Performance Committee
3816	Public Inquiries, Police Investigations, Fatal Accident Inquiries and other Reviews and Inspections	Public Inquiries, Police Investigations, Fatal Accident Inquiries and other major Reviews and Inspections as a result of adverse incidents impacts on staff wellbeing, public confidence and service delivery.	20 - Very High	15 - High	Vanhegan, Elaine	Reputational	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	Breen, Michael	Financial / Commercial	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	12 - High	Edwards, William	Operating	Open	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	Steele, Tom	Operating	Open	Finance, Planning and Performance Committee
4035	Climate Change & Sustainability Strategy	NHSGGC are unable to deliver the Climate Change & Sustainability Strategy to meet the Board's statutory requirements and Scottish Government Direction.	20 - Very High	9 - Medium	Steele, Tom	Financial / Commercial	Cautious	Finance, Planning and Performance Committee
3057	People who have been Delayed in their Discharge within NHSGGC	Unable to maintain whole system flow, which results in increased delayed discharges.	20 - Very High	9 - Medium	Wallace, Angela	Operating	Open	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	Smith, Natalie	People / Workforce	Moderate	Staff Governance Committee
3052	Regulatory body compliance	Failure to achieve and maintain statutory compliance through regulatory bodies	16 - High	3 - Low	Steele, Tom	Legal	Cautious	Finance, Planning and Performance Committee
2054	In Patient / Day Case Treatment Time Guarantee (incl. 8 key diagnostic tests).	NHSGGC fails to deliver Inpatient /Day Case TTT targets to agreed ADP trajectories.	15 - High	12 - High	Edwards, William	Operating	Open	Finance, Planning and Performance 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	Edwards, William	Operating	Open	Finance, Planning and Performance Committee
2199	Pandemic Response	Inability to respond effectively to a pandemic in order to provide healthcare service to patients.	12 - High	12 - High	Crighton, Emilia	Operating	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 across the pillars of confidentiality, integrity and availability	12 - High	6 - Medium	Brown, Denise	Operating	Open	Audit and Risk Committee
3059	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	Smith, Natalie	People / Workforce	Moderate	Staff Governance Committee
2060	Breakdown of failsafe mechanisms for National Screening Programmes	Breakdown of failsafe mechanisms for any National Population Screening Programmes, that could lead to delayed diagnosis/ treatment.	10 - High	10 - High	Crighton, Emilia	Clinical	Moderate	Population Health and Wellbeing Committee
3053	Medicine costs and funding availability	Overall medicines costs for NHS Greater Glasgow and Clyde are unsustainable in the future	9 - Medium	6 - Medium	Davidson, Scott	Financial / Commercial	Moderate	Finance, Planning and Performance Committee
3058	Public Protection	Breakdown in Public Protection Procedures and Processes	9 - Medium	6 - Medium	Wallace, Angela	Clinical	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	Davidson, Scott	Clinical	Moderate	Staff Governance Committee
3062	Safe & Effective Use of Medicines	Failure to avoid preventable patient and organisational harm from the use of medicines.	8 - Medium	8 - Medium	Davidson, Scott	Clinical	Moderate	Clinical and Care Governance 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, inline with NHS Scotland values.	8 - Medium	6 - Medium	Smith, Natalie	People / Workforce	Moderate	People Committee
3432	Industrial action	Industrial action that results in major disruption to service	8 - Medium	4 - Medium	Smith, Natalie	People / Workforce	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	MacArthur, Claire	Operating	Open	Finance, Planning and Performance 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	Smith, Natalie	People / Workforce	Moderate	Staff Governance Committee