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| NHS Greater Glasgow and Clyde | Paper No. 25/126 |
| Meeting: | NHSGGC Board Meeting |
| Meeting Date: | 30 October 2025 |
| Title: | Corporate Risk Register |
| Sponsoring Director: | Colin Neil, Director of Finance |
| Report Author: | Katrina Heenan, Chief Risk Officer |

1. Purpose

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 August 2025. The Corporate Risk Register included in this paper reflects the period July to September 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:

- Corporate Management Team 1 September, 6 October 2025
- Clinical Care and Governance Committee 4 September 2025
- Audit and Risk Committee 18 September 2025
- People Committee 25 September 2025
- Finance, Planning and Performance Committee 9 October 2025

8. Date Prepared & Issued

Prepared on: 15 October 2025

Issued on: 22 October 2025

Corporate Risk Register Review

Reporting Period: July to September 2025

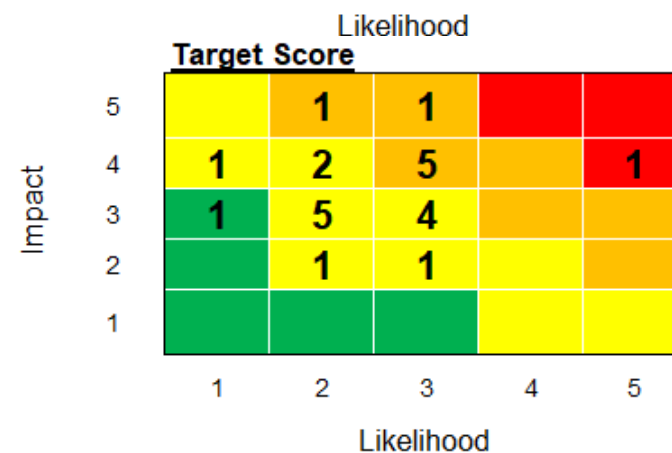
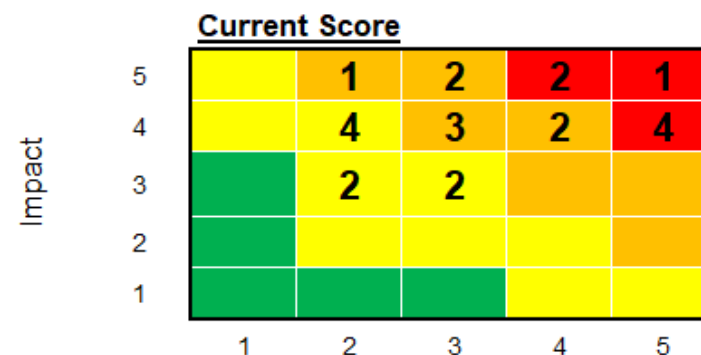
NHSGGC Board: 30 October 2025

Corporate Risk Dashboard

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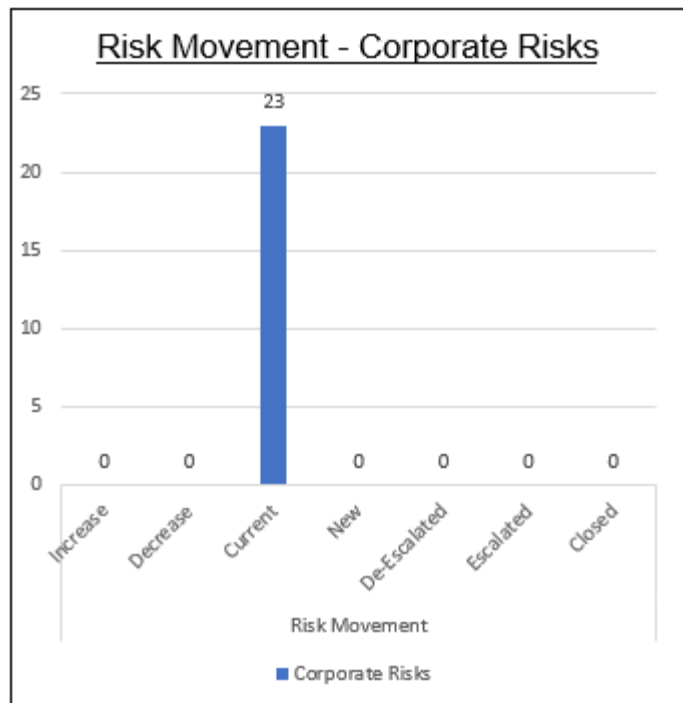
| ID | Risk Title | July | Aug | Sept | Target Risk Score | Trend | Risk Reviewed in Month |
|----------------------------------|--|------|-----|------|-------------------|-------|------------------------|
| Current Risks – No Change | | | | | | | |
| 3036 | Financial Sustainability – Revenue | 25 |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

| Month | Number of risks reviewed | Number of Corporate Risks | CRR Risks Reviewed in month % |
|--------|--------------------------|---------------------------|-------------------------------|
| July | 21 | 23 | 91% |
| August | 23 | 23 | 100% |
| Sept | 21 | 23 | 91% |



Note – Risk Register has been presented to Corporate Management Team on 6 October 2025, subject to Governance Committee approval.

Corporate Risk Register - Analysis



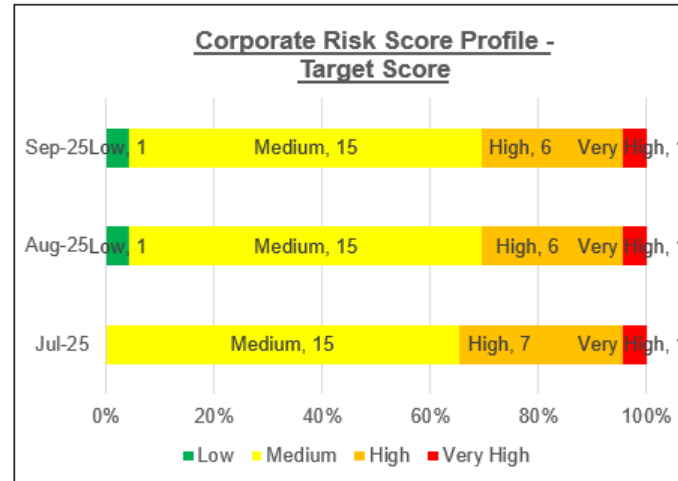
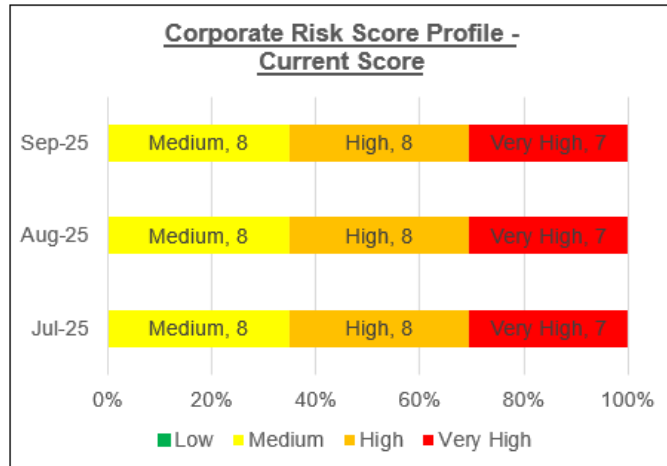
Corporate Risk Register – Movement in Risk Numbers

| Risk Movement | Total | Risk Titles |
|------------------------------------|-----------|-------------|
| No. of risks July 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 September 2025 | 23 | |

Commentary

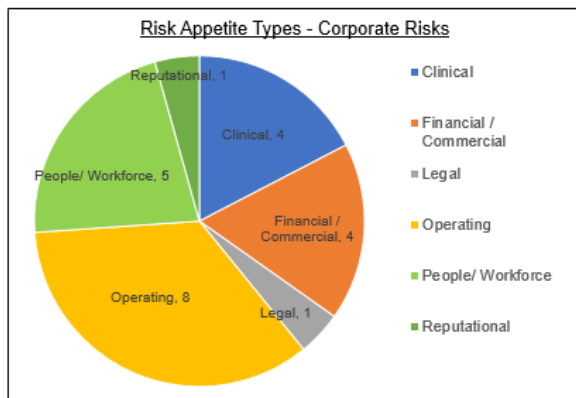
The Corporate Risk Register comprises 23 risks.

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 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

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| 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 |
| | CO16 | To ensure NHSGGC provides services that are environmentally sustainable meeting targets and legislative policy to work towards achieving new zero by 2045. | Regulatory body compliance | 16 |
| 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. | Climate Change & Sustainability | 20 |
| | | | 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 | Risk Title | Risk Description | Risk Score - Current | Risk Score - Target | Risk Owner | 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 | Neil, Colin | 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 | 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 | 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 | 12 - High | Edwards, William | 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 | 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 | 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 | 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 | Moderate | Staff Governance Committee |
| 3052 | Regulatory body compliance | Failure to achieve and maintain statutory compliance through regulatory bodies | 16 - High | 3 - Low | Steele, Tom | 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 TTG targets to agreed ADP trajectories. | 15 - High | 12 - High | Edwards, William | 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 | 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 | 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 | 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 | 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 | 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 | Moderate | Finance, Planning and Performance Committee |
| 3058 | Public Protection | Breakdown in Public Protection Procedures and Processes | 9 - Medium | 6 - Medium | Wallace, Angela | 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 | Moderate | Staff 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 | Moderate | People 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 | Moderate | Clinical and Care Governance Committee |
| 3432 | Industrial action | Industrial action that results in major disruption to service | 8 - Medium | 4 - Medium | Smith, Natalie | 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 | 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 | Moderate | Staff Governance Committee |