

NHS 24

BOARD MEETING

27 FEBRUARY 2025

ITEM NO 9.2

FOR ASSURANCE

RISK MANAGEMENT UPDATE

Executive Sponsor:

John Gebbie, Director of Finance

Lead Officer/Author:

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Action Required:

The Board is asked to review the attached risks and take assurance from the processes in place to manage risk in NHS 24.

Key Points for the Board to consider:

Since previously presented to the Board, the key changes for consideration are as follows:

- There are currently 28 corporate risks in total, compared with 35 reported to the previous Board meeting on 19 December 2024.
- 4 new risks have been identified and outlined in section 5.7.
- 11 risks have been closed, rationale for closure provided in section 5.8.
- 6 risks have reduced in score, as outlined in section 5.9.

Governance process:

Prior to presentation to the Board, corporate risks were presented at the following forums:

25/11/24: Operational Risk Management Group

11/12/24: EMT Risks & Opportunities Group

20/01/25: EMT Business Meeting

04/02/25: Staff Governance Committee Meeting

06/02/25: Clinical Governance Committee Meeting

10/02/25: Planning and Performance Committee Meeting

13/02/25: Audit & Risk Committee

Strategic alignment and link to overarching NHS Scotland priorities and strategies:

This paper is part of the governance review process for risk and provides assurance to the EMT Business Meeting, Board and Committees that there is an effective risk management process in place to support delivery of key strategic priorities and supporting documentation below:

- NHS 24 Strategy
- 3 Year Corporate Delivery Plan
- Key Scottish Government Ministerial Priorities
- NHS 24 Realistic Medicine Framework

Strategic alignment and link to Corporate Delivery Plan activity:

Corporate Deliverable 2: Continuous improvement of core service performance in line with NHS 24's Key Performance Framework, and delivery of programmes to support the wider health and care system and delivery of Right Care, Right Place.

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.

1. RECOMMENDATION

1.1 The Board is asked to review the attached risks and take assurance from the processes in place to manage risk in NHS 24.

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. The Committee discussed this paper and provided feedback at its meeting on 13 February 2025.

4. RISK MANAGEMENT UPDATE/ACTIVITIES

4.1 The Risk Management Framework and key risks to the delivery of NHS 24's Strategy and Delivery Plans were discussed at the Board Development Session on 30th January 2025, aligned with key corporate planning documents.

4.2 As part of the ongoing development and improvement of risk reporting, an additional section has been added to the risk register to show the organisational risk appetite for each type of risk, compared to the current position/score and the target score of each risk. Work will continue to develop this reporting to ensure meaningful presentation of data to support decision making.

4.3 Both minor improvement actions set out in the 2024/25 Risk Management Internal Audit have been completed and closed. The first relates to undertaking a review of the risks in the risk register to ensure content is reflective of agreed and accurate timescales for achieving target scores. The second to ensuring mitigating actions are assigned actions owners with clear and consistent timescales for completion.

4.4 For additional assurance, the Board is provided with all risks scoring 10 and above relating to the Digital Transformation Programme. These risks are reviewed and managed within the programme governance structure and are presented for additional assurance. All programme level risks are reviewed and considered by the appropriate Programme Board which has the responsibility to consider and assess if any of the risks on the register require escalation to the Corporate Risk Register. The Strategic Delivery Group has an overview of all key programmes of work and is responsible for assessing the cumulative impact of those risks across the wider organisation.

5. RISK SUMMARY

5.1 There are currently 28 corporate risks in total, compared with 35 reported to the previous Board meeting on 19 December 2024. Since previously reported:

- 4 new risks have been identified and outlined in section 5.7.
- 11 risks have been closed, rationale for closure provided in section 5.8.
- 6 risks have reduced in score, as outlined in section 5.9.

5.2 The attached risk register details all current corporate risks scoring 10 and above as at 30 January 2025 (5 in total).

5.3 Risk Scores Profile/Heat Map

The risk profile (figure 1), provided in the form of a heat map below, highlights the current position of all corporate risks. You will note that a number of risks have reduced in score and currently, only 5 risks score 10 and above. This is reflective of the year end position as risks are mitigated by the completion of in-year delivery plans. However, work is already underway to consider and capture new and emerging risks to the delivery of 2025/26 objectives and priorities. This also reflects the internal audit recommendations relating to target dates and scores.

In line with the NHS 24 Risk Management Framework, all new, closed and score changes for risks regardless of score are highlighted in the paper. All Committees and Board are provided with all NHS 24 corporate risks on an annual basis.

Figure 1. Risk Profile Heat Map

		Likelihood					Total	Prev Score
		Rare	Unlikely	Possible	Likely	Almost Certain		
Impact	Score	1	2	3	4	5		
	Extreme	5	-	0 (0)	1 (1)	0 (0)	0 (0)	1 (1)
	Major	4	1 (0)	12 (7)	1 (7)	0 (0)	0 (0)	14 (14)
	Moderate	3	0 (0)	5 (5)	4 (11)	3 (3)	0 (0)	12 (19)
	Minor	2	-	0 (0)	1 (1)	0 (0)	0 (0)	1 (1)
	Negligible	1	-	-	-	-	-	(0)
Total		1	17	7	3	0	28	
Prev Score		(0)	(12)	(20)	(3)	(0)		(35)

5.4 Risk Target Dates

The risk target dates (figure 2 below), provides a comparison of current target dates to those previously reported. There were previously 9 risks reported with target dates in Quarter 3 2024/25. Of those 9 risks, 5 were closed in line with their target dates, of the 4 remaining, the following updates were made:

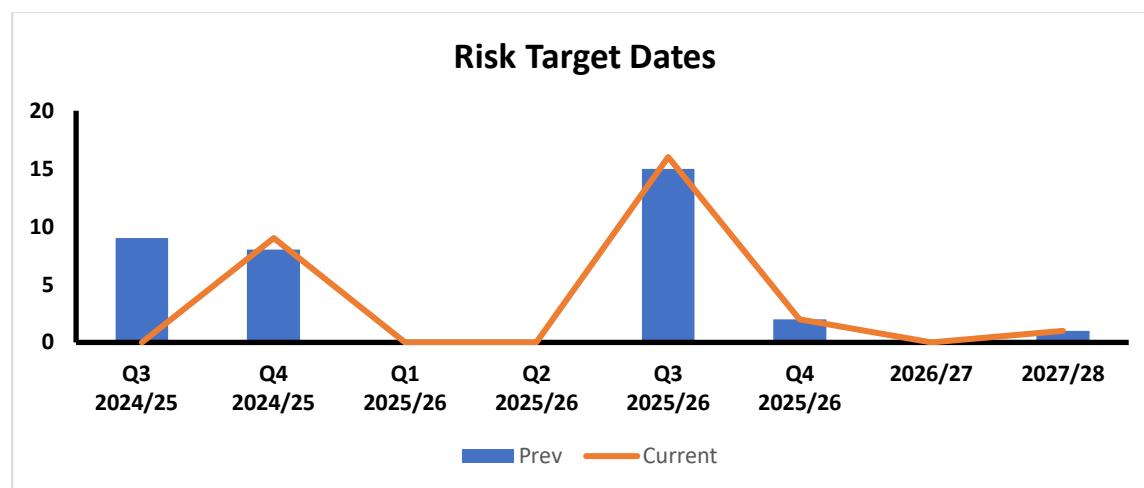
- RI-0004336: There is a risk that NHS 24 may be challenged to respond to exceptional peak winter 24/25 pressures while delivering the Digital and Service Transformation Strategic programmes of work. This risk target date was extended from 31/12/2024 to 31/03/2025 to cover the full winter period

and not just festive. This risk is on target to be closed in line with the extended date and new and emerging risks will be considered as winter planning is progressed for 2025/26.

- RI-0009057: There is a risk that negative findings arising from an Independent National Whistleblowing investigation may undermine staff confidence in organisational policies/processes aimed at enabling staff to raise concerns safely. This risk target date was extended from 31/12/2024 to 28/02/2025 as no feedback had yet been received from the Independent Whistleblowing Officer, however, it has now been confirmed that their report should be received before the end of February.
- RI-0004625: This is a risk that an ongoing error with the automated call number update function within the frontline call management system, patient records do not have the correct telephone number attached to correct record. The target date for this risk was extended to align with the Digital Transformation Programme (31/10/2025). To date, it has not been possible to replicate this error and therefore identify a fix. However, as set out in the mitigation, a number of robust controls have been put in place to mitigate further. Further consideration is also being given to a process change to mitigate further. Work is ongoing and risk will be fully mitigated following the implementation of the Digital Transformation Programme.
- RI-0003956: There is a risk that NHS 24 is limited in its ability to discharge its public protection responsibilities in full due to current service delivery model of Breathing Space. This risk has reduced in score to 4, just above the target score of 3. The target date was extended to 28/02/2025 to allow additional time to test the technical change which has been implemented and ensure it is working as it should be.

This demonstrates we are managing risks effectively within the target dates where possible and dates extended with valid explanation. The EMT are provided with a report detailing the urgent risks.

Figure 2: Target Dates

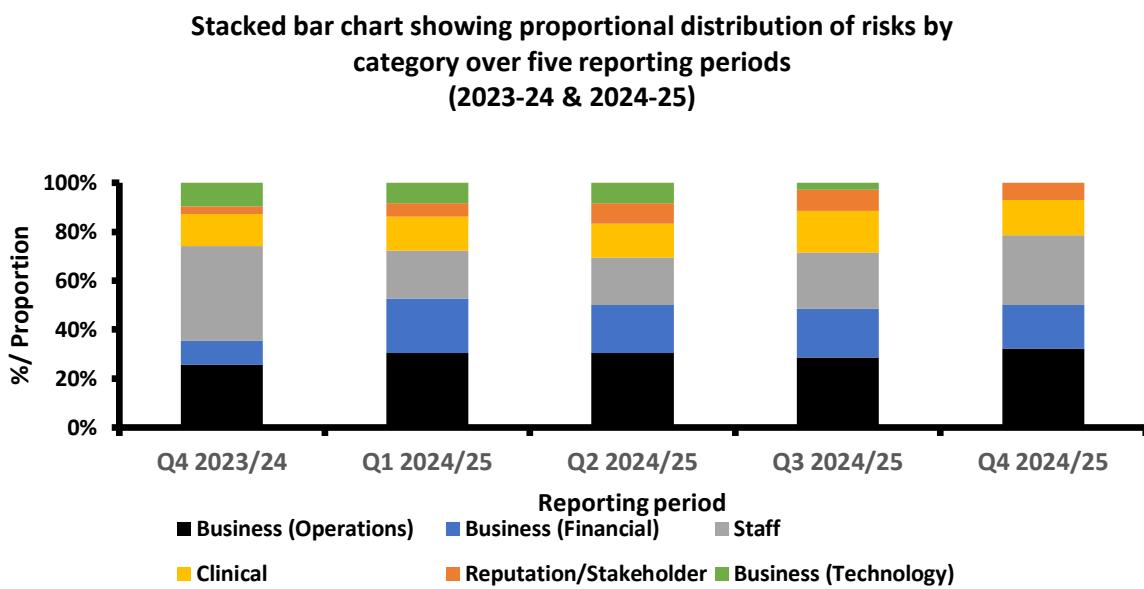


	Q3 2024/25	Q4 2024/25	Q1 2025/26	Q2 2025/26	Q3 2025/26	Q4 2025/26	2026/27	2027/28
Prev	9	8	0	0	15	2	0	1
Current	0	9	0	0	16	2	0	1

5.5 Current Risk Profile/Type

Figure 3 below sets a stacked bar chart showing proportional distribution of risks type over 5 reporting periods. This demonstrates that although there has been a significant amount of movement in terms of risks closing and new ones opening, the risk profile per type of risk remains fairly consistent over a 12 month period. Business Technology risks have reduced over this period due to a more stable system.

Figure 3



5.6 NHS 24 – Strategic Aims

The Corporate Delivery Plan clearly sets out NHS 24's Strategic Aims and each corporate risk is aligned to one of those strategic aims. Figure 4 below shows the number of corporate risks aligned to each strategic aim. This risk profile will be monitored across all risks to demonstrate trends against particular strategic aims.



5.7 New Risks

Since previously reported, 4 new risks have been identified as follows:

- RI-0020161: There is a risk that NHS 24's Business Continuity arrangements are compromised due to the phasing out and increased difficulties supporting fax machines within NHS Health Boards. In the event of full system failure (resulting in the loss of email), the transfer of patient records to partners becomes less reliable due to no agreed alternative contingency arrangements in place for faxing. This risk has a score of 8 (4x2). Planning & Performance is the Primary Committee and Clinical Governance the Secondary Committee.
- RI-0021433: There is a risk that the Training and Practice Education function will not have the capacity and capability to deliver the strategic priority of CC/CRM training, demands of core induction training and the implementation of the approved business case to develop the Practice Education function, if the implementation of the CC/CRM system does not deliver the anticipated benefits (including reduced training requirements) and knowledge transfer from the supplier is not sufficient. This risk has a score of 8 (4x2). Staff Governance is the Primary Committee and Clinical Governance the Secondary Committee.
- RI-0020521: There is a risk that NHS 24 incurs additional and/or double running costs if the period allocated within the Digital Transformation Programme is not implemented on schedule. This risk has a score of 8 (4x2). Planning & Performance is the Primary Committee and Audit & Risk the Secondary Committee.
- RI-0021388: There is a risk that NHS 24 is unable to attract candidates with the required skills and experience for executive level posts due to recent national agenda for change pay awards resulting in some grades paying more than the lower point on the executive level pay scale. This risk has a score of 8 (4x2). Staff Governance is the Primary Committee and Planning & Performance the Secondary Committee.

5.8 Closed Risks

Since previously reported, 11 risks have been closed as follows:

- RI-0012884: There is a risk that NHS 24 do not capitalise on the financial opportunities associated with the Estates Strategy. Following approval to enact the lease break at Lumina, with notice now served, this risk has been mitigated as far as possible and was presented and approved for closure at the EMT Risks & Opportunities Group on 11 December 2024. However, work continues to monitor any new and emerging risks in this area as decommissioning plans are drawn up.
- RI-0011404: There is a risk that, in the event of a Sunderland datacentre failure,

[REDACTED] This risk was presented to the EMT Risks & Opportunities Group on 11 December 2024 where it

was confirmed that the system changes to carry out data replication were now complete and therefore this risk was mitigated and could be closed.

- 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. Confirmation received that the 2024/25 pay award had been funded and therefore the risk mitigated and approved for closure. The implications of the 36 hour week are currently being worked through and will form a new risk as part of the 2025/26 financial planning but is not a risk in 2024/25.
- RI-0003975: There is a risk the Training and Practice Education Team do not have capacity to fully support the continuous development of frontline staff as set out in their Strategy due to organisational demand for Induction Training. This risk and risk RI-0004345 were discussed in detail by the Director of Nursing & Care and senior team, and it was agreed that although a number of the mitigations were complete and this risk as it stands could be closed, it was acknowledged that there was still some risk in this area specially relating to the delivery of both the Digital and Service Transformation Programmes. It was therefore agreed that this risk and risk RI-0004345 would be closed at this time, and a new risk would be raised to better capture the current risk. (see para 5.5 above, risk RI-0021433).
- 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.
- RI-0003952: There is a risk that if the national 'Once for Scotland' policy and systems work is not progressed in a timely manner, this will impact on NHS 24's ability to deliver organisation strategy and action plans. Mitigating actions are complete and a new model in place to ensure all new policies are introduced in a structured way. Risk was presented and approved for closure at the EMT Risks & Opportunities Meeting on 11 December 2024.
- RI-0004729: There is a risk that the recurring aspirations of the organisation cannot be met due to financial constraints. Mitigating actions complete and ongoing controls in place. NHS 24 is on target for financial balance at the end of the financial year. Risk was presented and approved for closure at the EMT Risks & Opportunities Meeting on 11 December 2024.
- RI-0003916: 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. Mitigating actions complete and ongoing controls in place. Attrition currently below target with robust ongoing controls in place. Control measure agreed that if turnover starts to increase and reaches 21% then this will be escalated, and a new risk considered. Risk was presented and approved for closure at the EMT Risks & Opportunities Meeting on 11 December 2024.
- RI-0012497: There is a risk, that the effectiveness of the provision of Breathing Space Services is compromised due to the ongoing intermittent technical issues and

reduced functionality with the Webchat Service following change in supplier. ICT change has now been implemented and service has been stable for a sustained period.

- RI-0003973: There is a risk that frontline staff inappropriately access information on the public protection referrals, due to no control measures being available within the current Public Protection system. All mitigations complete, most significantly, the implementation of the new Incident Management System and associated training. Risk was presented and approved for closure at the EMT Risks & Opportunities Meeting on 11 December 2024.
- RI-0003938: There is a risk that NHS 24 are unable to meet current and future training needs due to the inability to release front line staff because of continued and sustained service pressure demands. Mitigations complete and ongoing monitoring controls in place. Compliance levels of essential learning at an all-time high, reporting continued and sustained above target levels of compliance. Risk was presented and approved for closure at the EMT Risks & Opportunities Meeting on 11 December 2024.

5.9 **Reduced Risks**

Since previously reported, 6 risks have reduced in score as follows:

- RI-0007975: Benefits articulation and realisation. There is a risk that NHS 24 are not clear on the benefits articulation and realisation of key strategic programmes. This risk has reduced from 12 to 6 due to progress on mitigating actions in line with the in-year delivery plan. Potential risks relating to the delivery of the 2025/26 in year delivery plan are currently being considered and will be reported to the next meeting.
- 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. Score reduced from 12 to 8 due to progress with mitigating actions. This risk is on target to close at the end of the financial year. Potential risks relating to the delivery of the 2025/26 Financial Plan are currently being considered and will be reported to the next meeting.
- RI-0004336: There is a risk that NHS24 may be challenged to respond to exceptional peak winter 24/25 pressures while delivering the Digital and Service Transformation Strategic programmes of work. Score reduced from 12 to 8 following completion of mitigating actions for winter planning. However, risk will remain until the end of the winter period.
- RI-0003932: 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. Score reduced from 12 to 8 due to progress with mitigating actions, including delivery of key Middle and Senior leaders Programmes.
- RI-0003944: 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. Score

reduced from 8 to 6 due to progress with mitigating actions including delivery of workshops/targeted intervention to raise awareness of new Values and Behaviours Framework.

- RI-0003956: There is a risk that NHS 24 is limited in its ability to discharge its public protection responsibilities in full due to current service delivery model of Breathing Space. Score reduced from 8 to 4 following implementation of technical change to support access to caller details. Risk target extended for short period to monitor change to ensure it meets the needs of the service.

6. PROGRAMME RISKS

- 6.1 Governance is in place to manage the key strategic programmes within NHS 24, and to develop and manage risks to the delivery of key programmes of work. Escalation processes have been demonstrated to the Committees, with the Strategic Delivery Group playing a key role to provide oversight to programme progress and concurrent risk to monitor and consider risk themes and the cumulative impact across all programmes of work.
- 6.2 Digital and Service Transformation Programme risks continue to be reviewed and monitored through the appropriate governance routes and escalated where required. Timeframe, financial pressures, and capacity and capability to deliver continue to be risks that are being closely monitored.

Staff shortages, skill levels, capacity or high turnover rates may impact on the delivery of the programme. Resource plan developed highlighting conflicts, with dependencies identified and mitigation plan in place.

There is a risk that the period allocated for CC/CRM implementation is not sufficient, leaves no contingency if issues are encountered. NHS 24 view of outline plan has been prepared and risk areas identified. Sensitivity analysis outlines the vulnerabilities and contractual position.

- 6.3 Following discussion at the last Audit & Risk Committee, the Programme Risk process was updated to reflect the change that programme risks should be considered for escalation if they score 10 or above (previously 12 and above).

NHS 24
CORPORATE RISK REGISTER (correct as of 30/01/2025)

Case Ref	RI-0003979
Risk Register	Corporate - 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/Controls Ongoing:</p> <p>1. Improve cyber awareness across the organisation by the development and implementation of education/awareness plan. Action Owner: [REDACTED] (Ongoing - 31/03/2025)</p> <p>3. Ongoing programme of cyber exercising and education. Action Owner: [REDACTED] (Ongoing - 1/03/2025)</p> <p>Ongoing Controls:</p> <p>1. Information Governance and Security Committee, chaired by the Chief Information Officer, in place to: - 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)</p> <p>2. Ongoing review and updating of software Action Owner: [REDACTED] (Ongoing Control)</p> <p>3. Review of appropriate protection and threat detection technologies Action Owner: [REDACTED] (Ongoing Control)</p> <p>4. Close monitoring of anti-malware/spoofing reporting. Action Owner: [REDACTED] (Ongoing Control)</p>
Mitigation(s) Complete	<p>2. Cyber incident response exercise [REDACTED].</p> <p>3. Improved NIS-R compliance assessment from 2024 Review Audit - September 2024 - COMPLETE.</p> <p>5. Cyber incident response exercise [REDACTED]</p> <p>6. Improved NIS-R compliance assessment from 2024 Review Audit. Action Owner: [REDACTED] COMPLETE - September 2024</p> <p>7. Board development session on Cyber Security/Awareness. Action Owner: Kevin McMahon (Complete - 28 November 2024)</p>
Previous Score (AxB)	15
Current Consequence (A)	Extreme (5)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	15
Risk Appetite	
Target Score (AxB)	8
Target Date	31/03/2025

Case Ref	RI-0012885
Risk Register	Corporate - Finance
Receipt Date	27/08/2024
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Staff Governance
Description	There is a risk that NHS 24 Dundee site will become challenging to operate within as the building purpose has shifted to residential student accommodation from office space potentially requiring NHS 24 to exit sooner than expected.
Significant Impact	Residential and office space are not compatible. Therefore NHS 24 may need to be open to relocation from this site. The landlord may seek more lucrative opportunities than NHS 24. Therefore, NHS 24 needs may not be met.
Executive Risk Owner	Director of Finance
Strategy Type	Reduce
Mitigating Action	Mitigating Actions/Ongoing Controls 1. Explore opportunities within the Dundee area in line with lease break timeline. Action Owner: [REDACTED] (Ongoing - 28/02/2025). 2. Conclusion of lease break negotiations with Landlord (Ongoing - 28/02/2026) 3. Monitor landlord implementation to ensure it is aligned with approved planning permission criteria and assess impact of implementation on NHS 24 operations. (Ongoing - 28/02/2026) 4. Ongoing engagement with Central Legal Office to support process. Owner [REDACTED] (Ongoing Control)
Mitigation(s) Complete	Mitigating Actions/Ongoing Controls - Complete 1. Continue open dialogue with landlord over building intentions. Landlord confirmed intentions to appointed property advisors Action Owner: [REDACTED] (Complete). 2. Appointed property advisors Avison Young [REDACTED]
Previous Score (AxB)	12
Current Consequence (A)	Major (4)
Current Likelihood (B)	Possible (3)
Current Score (AxB)	12
Risk Appetite	
Target Score (AxB)	3
Target Date	31/03/2026

Case Ref	RI-0013952
Risk Register	Corporate - Finance
Receipt Date	13/09/2024
Primary Governance Committee	Planning & Performance
Secondary Governance Committee	Audit & Risk
Description	There is a risk that NHS 24 is unable to close the current non-recurring funding gap for the implementation of the Digital Transformation Programme (DTP).
Significant Impact	<p>NHS 24 do not meet financial balance at year end (2024/25 and/or 2025/26)</p> <p>Key deliverables set out in NHS 24 Strategy not achieved.</p> <p>Reputational damage</p>
Executive Risk Owner	Director of Finance
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions/Controls - Ongoing</p> <p>1. For CC/CRM, Decision Support and Data Warehouse there is a fixed/capped implementation cost build into the contracts, therefore risk shared with supplier to mitigate potential cost over runs not caused by NHS 24. Action Owner: [REDACTED] (Ongoing – October 2025).</p> <p>2. Close monitoring of all aspects of the implementation phase of the DTP including finance and key deliverables/milestones. Action Owner: [REDACTED] (Ongoing – 31 October 2025)</p> <p>3. Review and consider opportunities to accelerate spend in 2024/25 to potentially reduce the impact on 2025/26 by prioritising funding opportunities. Action Owner: [REDACTED] (Ongoing - 31 March 2025)</p> <p>4. Prioritising Digital Transformation over other key programmes of work for any discretionary savings. Action Owner: [REDACTED] (Ongoing Control)</p> <p>5. Ongoing monitoring and achievement of savings targets. Action Owner: [REDACTED] (Ongoing Control)</p>
Mitigation(s) Complete	0
Previous Score (AxB)	12
Current Consequence (A)	Moderate (3)
Current Likelihood (B)	Likely (4)
Current Score (AxB)	12
Risk Appetite	
Target Score (AxB)	3
Target Date	31/10/2025

Case Ref	RI-0003925
Risk Register	Corporate - Workforce
Receipt Date	12/04/2023
Primary Governance Committee	Staff Governance
Secondary Governance Committee	Planning & Performance
Description	<p>Workforce Strategy</p> <p>There is a risk that due to pressures to deliver improved external patient facing ICT interfaces and the dedicated resources and finance this will require, we are unable to deliver the modernisation of systems and digitisation internally which will enable delivery of the Workforce Strategy and Plan 2022-25 and wider organisational Strategy and Plans.</p>
Significant Impact	<p>Internal ICT infrastructure requires to meet and match the same ambitions of the external facing ICT infrastructure as described in the Corporate Strategy 2023-2028.</p> <p>[REDACTED] to obtain basic information, making it inefficient and diverting staff from value added work</p>
Executive Risk Owner	Director of Workforce
Strategy Type	Reduce
Mitigating Action	<p>Mitigating Actions Ongoing</p> <ul style="list-style-type: none"> Utilise and continue to link in with NES to adopt national internal ICT systems, promoting efficiencies (Ongoing control) End of Year 1 Risk Mitigations (30th Oct 2023) <p>End of Year 1 Risk Mitigations (30th Oct 2023) - New KPI developed for Year 2</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) - 25% of Workforce Digital Workplan completed (Year 1 - 91% Complete)</p> <p>End of Year 3 Risk Mitigations (30th Oct 2025) - 50% of Workforce Digital Workplan completed</p> <ul style="list-style-type: none"> Complete Digital Skills Audit to identify known gaps and move to close these, promoting digital literacy within Workforce Directorate. Action Owner: [REDACTED] Research, design and conduct a survey and Digital Skills Learning Needs and Confidence Analysis (in conjunction with NES Skills Library) to address gaps through a programme of digital literacy and product education to support Digital Transformation (including BT Managed Services and Data Warehouse) to Corporate Directories. Action Owner: [REDACTED] Develop and deliver in partnership with Practice Education the Training Plan for CC/CRM to support Digital Transformation (Oct 2025). Action Owner: [REDACTED] <p>Key Risk Indicators:</p> <ul style="list-style-type: none"> % of internal workforce processes automated Skills Audit completion levels and no. of gaps closed Evaluation data from test of change % of NHS 24 Workforce upskilled in digital skills Mitigating Actions Complete Redefine an existing role to focus activities within the digital environment to drive efficiency and effectiveness in Workforce Directorate (Dec 2023) Utilise learning from e-RAF built by ICT to build future automated processes on (Dec 2023)
Mitigation(s) Complete	<ul style="list-style-type: none"> ICT and Workforce Directorate to collaboratively conduct a 'Test of Change' to convert current Intranet [REDACTED] Action Owner: [REDACTED] Establish a Data and Digital Group. Work collaboratively with ICT and influence pace of internal ICT changes where possible. Action Owner: [REDACTED] (Oct 2024)
Previous Score (AxB)	12
Current Consequence (A)	Moderate (3)
Current Likelihood (B)	Likely (4)
Current Score (AxB)	12
Risk Appetite	
Target Score (AxB)	3
Target Date	31/10/2025

Case Ref	RI-0003927
Risk Register	Corporate - 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	<p>Prolonged waits to access services resulting in poor patient experience and reputational damage.</p> <p>Impacts negatively on staff morale, retention and wellbeing.</p>
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). Action owner: [REDACTED] Increased Formal Attendance Meetings to support line managers in managing attendance of their staff, signalling expectations to staff of the importance to attend work. Action owner: [REDACTED] Health & Wellbeing initiatives for staff to support by providing positive working environment, occupational health services and one to one support. Action owner: [REDACTED] Ongoing support for managers through Management Essentials and Leadership & Development Programmes. Action owner: [REDACTED] <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 <7.5% As of 30/09/24 8.44%)</p> <ul style="list-style-type: none"> Actions moved to complete, or if outstanding to Year 3 <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 Action Owner: [REDACTED] Evaluate and Review impact of Attendance Action Plans on Attendance Management Action Owner: [REDACTED] Continuation/enhancement of existing management development and support for managers Action Owner: [REDACTED] Conduct quarterly audits to enhance consistency of advice offered and drive policy compliance. Action Owner: [REDACTED] Further development and embedding of the use of case management KPIs. Action Owner: [REDACTED] Ensuring policy support, guidance and training is in place for line managers. Action Owner: [REDACTED] Expanding use of Case Management Module to inform MI systems for reporting and analysis. Action Owner: [REDACTED] <p>Key Risk Indicators</p> <ul style="list-style-type: none"> Absence levels % of managers trained in accessing and applying relevant policies and procedures
Mitigation(s) Complete	<p>Mitigating Actions Complete</p> <ul style="list-style-type: none"> Improved sickness absence reporting suite Manager Dashboards to be rolled out from July to ensure accountability Wellbeing Team Managers in place to drive progress in relation to improvement plan and ensure a positive and consistent approach to attendance management Development of Workplace Adjustment Policy in partnership with Business Disability Forum All Directors and Managers to have attendance targets as an objective within their Appraisal Internal Audit of Attendance Management Workplace Adjustment Policy Workshops Ensure compliance with Scottish Government Mental Health and Wellbeing Workforce Action Plan 2023 - Initiatives delivered are compliant with plan Review of Attendance and Wellbeing Action Plans. Action Owner: [REDACTED] - Wellbeing now sits with Wellbeing Manager and Attendance management now BAU Introduce case management KPIs Action Owner: [REDACTED] Procure case management system to report on KPI's - Case Management module procurement in progress Action Owner: [REDACTED] Extraction of Wellbeing Team Managers by Service Delivery, with all levels of line management taking full ownership of attendance management Action Owner: [REDACTED] Introduction of home (Remote) working for frontline by Service Delivery Action Owner: [REDACTED]
Previous Score (AxB)	12
Current Consequence (A)	Moderate (3)
Current Likelihood (B)	Likely (4)
Current Score (AxB)	12
Risk Appetite	
Target Score (AxB)	8
Target Date	31/10/2025