NHS Highland

Meeting: NHS HIGHLAND BOARD MEETING

Meeting date: 26 September 2023

Title: NHS Highland Board Risk Register

Responsible Executive/Non-Executive: Dr Boyd Peters, Board Medical Director

Report Author: Lorraine Cowie, Head of Strategy & Transformation

1   Purpose

This is presented to the Board for:

- Assurance

This report relates to a:

- Legal requirement

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

This report relates to the following Corporate Objective(s)

Start Well		Thrive Well		Stay Well		Anchor Well	
Grow Well		Listen Well		Nurture Well		Plan Well	
Care Well		Live Well		Respond Well		Treat Well	
Journey Well		Age Well		End Well		Value Well	
Perform Well		Progress Well		All Well Themes	X		

2   Report summary

This report is to provide the Board with an overview extract from the NHS Highland Board risk register, awareness of risks that are being considered for closure or additional risks to be added.

2.1 Situation

This paper is to provide the Board with assurance that the risks currently held on the NHS Highland Board risk register are being actively managed through the appropriate Executive Leads and Governance Committees within NHS Highland and to give an overview of the current status of the individual risks.

The NHS Highland risk register continues to be refreshed in line with "Together We Care, with you, for you" to ensure we are aligned to the direction it sets out for us as an organisation. It will also be refreshed in line with our risk appetite approach and alignment to transformation programmes moving forward. There will also be an approach to give the high level mitigating actions by the next Board meeting for assurance.

The NHS Highland Executive Directors' Group (EDG) maintains the NHS Highland Risk Register and reviews on a monthly basis. The content of the NHS Highland Risk Register will be informed by the input from the EDG, Senior Leadership Teams, Governance Committees and NHS Highland Board.

All risks in the NHS Highland Risk Register have been mapped to the Governance Committees of NHS Highland and they are responsible for oversight and scrutiny of the management of the risks. An overview is presented to the Board on a bi-monthly basis.

The Audit Committee is responsible for ensuring we have appropriate risk management processes in place.

For this Board meeting this summary paper presents a summary of the risks identified as belonging to the NHS Highland risk register housed on Datix.

2.2 Background

Risk Management is a key element of the Board's internal controls for Corporate Governance and was highlighted in the 2022 publication of the "Blueprint for Good Governance." The Audit Committee provides assurance to the Board that risk management arrangements are in place and risks are managed effectively.

Each of the Governance Committees is asked to review their risks and to identify any additional risks that should be on their own governance committee risk register. Review of these risks registers will be undertaken on a bi-monthly basis or as determined by the individual committees.

It has been agreed that the Head of Strategy & Transformation will manage the NHS Highland risk register along with the Board Medical Director to ensure alignment across the strategy, transformation and operational areas across the organisation.

2.3 Assessment

The following section is presented to the Board for consideration of the updates to the risks contained within the NHS Highland Risk Register. The following risks are aligned to the governance committees in which they fall within and consideration has been given to the strategic objective and outcome to ensure strategic alignment.

<u>Staff Governance Risks</u>

Risk Number	706	Theme	Workforce Availability
Risk Level	Very High	Score	20
Strategic Objectives		Grow Well, Nurture Well, Listen Well	
Governance Committee		Staff Governance Committee	
Risk Narrative			
There is an increased risk of failure to deliver essential services of the required capacity and quality, because of a shortage of available and affordable workforce, resulting in reduced services, lowered standards of care and increased waiting times as well as a negative impact on colleague wellbeing and morale and increased turnover levels. Work has been completed to establish international recruitment and although an important element of our overall approach this will not supply the large volumes of registered staff we require. We have tested innovative ways of reaching the wider UK job marker through the national treatment centre campaigns. There is more we can do this area but this will not address the underlying UK and Scottish wide shortage of workforce, particularly registered professional staff. Our planned actions which will be overseen by a new workforce oversight.			

Action	Milestone
Improvement plan to be developed for recruitment processes to minimise time from recruitment approval to positions filled	September 2023
Further proposals to be developed for enhancing our overall recruitment approach to maximise conversion rates from initial interest to completed applications including options for on the day interviews, assessment centre approaches etc	November 2023
Employability framework to be developed building on existing routes into health and social care and expand opportunities to enable people to experience health and social care and start a career pathway including expanding volunteering, work experience and student placements as well as apprenticeships	January 2023
Strategic workforce change programme to be developed to link new models of care with workforce diversification and re-shaping our workforce to achieve sustainable workforce models which also support employability and improved career pathways within health and social care	November 2023
Refresh approach to integrated annual planning cycle across service performance, workforce and financial	November 2023

planning to ensure we have a robust annual planning process that maximises service performance and quality, optimises current workforce utilisation and skill mix deployment to deliver better value from available workforce	
Delivery of safe staffing programme to embed principles of legislation including effective utilisation of available workforce, clinical and care risk management as well as support workforce planning within integrated annual planning cycle	March 2024

Risk Number	1056	Theme	Statutory & Mandatory Training Compliance
Risk Level	Very High	Score	20
Strategic Objectives		Grow Well, Nurture Well, Listen Well	
Governance Committee		Staff Governance Committee	

Risk Narrative

There is a risk of harm to colleagues and patients because of poor compliance with statutory and mandatory training requirements resulting in possible data breaches, injury or harm to colleagues or patients, poor standards of quality and care, reputational damage, prosecution or enforcement action.

The focus of the planned actions to mitigate this risk is to address the barriers to compliance as rapidly as possible and revert back to management of compliance through organisational performance management and governance structures including regular reporting to staff governance.

Action	Milestone
Short life working group to be established to review statutory and mandatory training processes including induction, face to face training and governance including reporting and tracking available to managers	September 2023

Risk Number	632	Theme	Culture
Risk Level	High	Score	12
Strategic Objectives		Our People	
Governance Committee		Staff Governance	

Risk Narrative

There remains a risk of negative colleague and patient experience, poor performance and retention issues within NHS Highland as a result of a poor culture in some areas, resulting in some people still not feeling valued, respected or listened to, despite ongoing improvements and recent de-escalation to Level 2 on the SG framework. This is a long term and ongoing piece of work.

A wide range of work has been undertaken over the last few years and the outputs have been captured as controls in this update to the risk. Further work is also underway way to consider our approach to staff engagement building on previous work noted in the update.

The Culture Oversight Group (COG) terms of reference have been refreshed including membership and this group will oversee the delivery of our leadership and culture programme. The COG reports to the Staff Governance Committee, who will receive updates on programme progress.

The committee and the board will receive a further update of this progress and future plans for our leadership and culture programme

Action	Milestone
Development and launch of refreshed leadership and management development programme	October 2023
Development of learning system to support skills development of leaders including: action learning sets, leadership networks, masterclasses, leadership and culture conferences/meetings, mentoring and coaching	October 2023
Further development of staff engagement approach including board wide 'living our values' project	December 2023

Risk Number	1101	Theme	Impact of current socio-economic situation
Risk Level	Very High	Score	20
Strategic Objectives		Grow Well, Nurture Well, Listen Well	
Governance Committee		Staff Governance Committee	

Risk Narrative
There is a risk of our workforce being impacted by the current social, political and economic challenges resulting in added financial pressures. This could impact on colleagues being able to attend work and stay healthy due to personal financial pressures, direct and indirect impact of strike action on workforce availability and increased absence due to physical, emotional and mental health impacts of the wider situation as well as potential supply chain and energy shortages, increased turnover to higher paid employment and pressure on office capacity due to expense of working from home. Demand for services will also increase creating further pressure on resources.

Action	Milestone
The Health and Wellbeing Strategy is being progressed and initiatives such as the Wingman Bus taken into consideration when planning additional support for colleagues. Our Employee Assistance Programme is also available for confidential support over a range of topics for all of our colleagues.	Ongoing

Finance, Resources and Performance Risks

Risk Number	666	Theme	Cyber Security
Risk Level	High	Score	16
Strategic Objectives		Progress Well	
Governance Committee		Finance, Resources & Performance	
Risk Narrative			
Due to the continual threats from cyber attacks this risk will always remain on the risk register. The management of risk of this threat is part of business as usual arrangements entailed with resilience.			

Risk Number	712	Theme	Fire Compartmentation
Risk Level	High	Score	16
Strategic Objectives		Progress Well	
Governance Committee		Finance, Resources & Performance	
Risk Narrative			
Work to improve the compartmentation within Raigmore Hospital has been carried out to fit sprinklers and improve fire compartmentation, however as from next year no identified source of funding is available to complete this work.			

Risk Number	1097	Theme	Transformation
Risk Level	High	Score	16
Strategic Objectives		Perform Well	
Governance Committee		Finance, Resources & Performance	
Risk Narrative			
NHS Highland will need to re -design to systematically and robustly respond to this challenges faced. If transformation is not achieved this may limit the Board's options in the future with regard to what it can and cannot do. The intense focus on the current emergency situation may leave insufficient capacity for the long-term transformation, which could lead to us unable to deliver a sustained strategic approach leading to an inability to deliver the required transformation to meet the healthcare needs of our population in a safe & sustained manner and the ability to achieve financial balance.			

Risk Number	1181	Theme	Financial Position
Risk Level	High	**Score**	16
Strategic Objectives		Perform Well	
Governance Committee		Finance, Resources & Performance	
Risk Narrative			

There is a risk that NHS Highland will not achieve its planned financial position for 2023/24 due to additional cost pressures presenting during the year and inability to realise reduction in spend in line with efficiency and transformation plans which will result in the Board failing against its financial plan and recovery plan with Scottish Government.

Risk Number	714	Theme	Backlog Maintenance
Risk Level	High	**Score**	12
Strategic Objectives		Progress Well	
Governance Committee		Finance, Resources & Performance	
Risk Narrative			

There is a risk that the amount of funding available to invest in current backlog maintenance will not reduce the overall backlog figure. Continuing to work with SG where able when extra capital funding is provided to remove all high-risk backlog maintenance.

Risk Number	1182	Theme	New Craigs PFI Transfer
Risk Level	Medium	**Score**	9
Strategic Objectives		Perform Well	
Governance Committee		Finance, Resources & Performance	
Risk Narrative			

There is a risk that the transfer of New Craig site does not progress to timescale or concluded effectively due to the tight timescale. This could result in reputational/ service risk is the transaction is not completed or financial impact - through either financial penalties or inability to maximise the estate for future service delivery and estate rationalisation.

Clinical and Care Governance Risks

Risk Number	959	Theme	COVID and Influenza Vaccines
Risk Level	High	**Score**	16
Strategic Objectives		Stay Well	
Governance Committee		Clinical and Care Governance	
Risk Narrative			

The spring/summer COVID vaccination programme has uptake rates of above 91% for adult care home residents and 76% for people in the community aged 75 and over in NHS Highland. For care homes this is slightly higher than the Scottish average and for the community it is lower. Uptake rates for people with a weakened immune system are similar to the national average. The influenza immunisation programme finished several months ago and will resume in the autumn. Vaccinations in general are now almost all delivered through the board rather than by general practice following the Vaccination Transformation Programme. Delivery risks remain for the programme, including finance, workforce and ensuring the most appropriate service design. These risks are most pronounced in the Highland HSCP area. Therefore, it is proposed that the risk level remains as high.

Risk Number	715	Theme	Impact of COVID on Health Outcomes
Risk Level	High	**Score**	15
Strategic Objectives		Stay Well	
Governance Committee		Clinical and Care Governance	
Risk Narrative			

COVID levels have reduced over recent months. However, population surveys of COVID have ceased and widespread testing has also stopped, so it is less easy to get an accurate picture of disease prevalence. Monitoring of virus levels in sewage shows continued presence at relatively low levels and cases are still being reported from health and care settings. The successful vaccination programme means that risks of serious consequences are much reduced and there is no current major concern regarding new variants and mutations. The seasonal influenza season has finished, and influenza cases are close to baseline levels.

Risk Number	877	Theme	Engagement & Service Design
Risk Level	High	Score	12
Strategic Objectives		Our Population – Anchor Well	
Governance Committee		Board Level Risk	
Risk Narrative			
There is a risk of services being designed and delivered in ways that make them unsuitable or inaccessible to some people; because of lack of resourcing of, or commitment to, partnership working and engagement, leading to poorer health outcomes and reduced wellbeing for people in Highland and Argyll & Bute, and damaging the performance and reputation of NHS Highland. Key element of mitigation has been the creation and approval of the Engagement Framework and the extensive consultation and engagement on the content of the Together We Care 5-year strategy and A&B HSCP 3- year strategic plan. Key element of mitigation has been the creation and approval of the Engagement Framework and the extensive consultation and engagement on the content of the Together We Care 5-year strategy and A&B HSCP 3-year strategic plan.			

2.4 Proposed level of Assurance

This report proposes the following level of assurance:

Substantial	X	Moderate	
Limited		None	

3 Impact Analysis

3.1 Quality/ Patient Care

A robust risk management process will enable risks to quality and patient care to be identified and managed. Assurance for clinical risks will be provided by the Clinical and Care Governance Committee.

3.2 Workforce

A robust risk management process will enable risks to relating to the workforce to be identified and managed. Assurance for these risks is also provided by the Staff Governance Group and where appropriate to the Clinical Governance Committee

3.3 Financial

A robust risk management process will enable financial and performance risks to be identified and managed. Assurance for these risks will be provided by the Finance, Resources and Performance Committee.

3.4 Risk Assessment/Management

This is outlined in this paper.

3.5 Data Protection

The risk register does not involve personally identifiable information.

3.6 Equality and Diversity, including health inequalities

An impact assessment has not been completed because this is a summary report.

3.7 Other impacts

No relevant impacts.

3.8 Communication, involvement, engagement and consultation

This is a publicly available document. We aim to share this more widely internally and externally to develop understanding of risks within the system in in line with our strategic objectives and outcomes once strategy is approved.

3.9 Route to the Meeting

Through the appropriate Governance Committees.

4 Recommendation

- take **substantial assurance** from the report in terms of compliance with legislation, policy and Board objectives.
- **Examine and consider** the evidence provided and provide final decisions on the risks that are recommended to be closed or added, and
- **Note** that the risk management process with alignment to the strategy will be presented to the next Board meeting.

4.1 List of appendices

None as summary has been provided for ease of reading