

# **DoH Departmental Risk Register**

**2018 - 2019**

## Departmental Risks

Dept. Risk (DR) No.	Dept. Risk Description
<b>DR1</b>	That available financial resources are insufficient and are not deployed effectively to ensure that essential services are maintained and the strategic objectives for the HSC and Public Safety are progressed in 2018/19.
<b>DR2</b>	That planning and prioritisation of financial resources for future years is not effective in ensuring that sufficient resources are available to maintain essential services and deliver the strategic objectives for HSC and Public Safety in future years
<b>DR3</b>	Departmental priorities are not met due to ineffective arrangements for the management, recruitment, engagement, deployment or development of Departmental staff
<b>DR4</b>	The requisite HSC workforce is not recruited, retained, trained or developed, with a consequent negative impact on service provision, due to: a lack of capacity and/or resources for effective workforce planning and development; and/or, prevailing employment market conditions for the healthcare sector.
<b>DR5</b>	There is an adverse effect on the demand for, and quality of, HSC Services due to the ineffective delivery of those NICS Outcome Programme outcomes for which the DoH is responsible
<b>DR6</b>	The health and social care sector may be unable to respond to the health and social care consequences of any emergency (including those for which the DoH is the Lead Government Department) due to inadequate planning and preparedness which could impact on the health and well-being of the population
<b>DR7</b>	Services provided are not safe or of appropriate quality due to ineffective measures being in place for the adequate discharge of the Department's statutory responsibilities under the Health and Social Care (Reform) Act (Northern Ireland) 2009
<b>DR8</b>	Failure to protect children, young people and adults at risk as a result of an ineffective planning and policy response
<b>DR9</b>	Appropriate standards of probity and governance are not maintained due to ineffectual internal control and sponsorship of arms length bodies
<b>DR10</b>	The required level of transformation in the HSC is not delivered due to lack of commitment within the system, political and citizen buy-in or a failure to effectively plan and manage change
<b>DR11</b>	Contractual arrangements for independent practitioners become impractical or financially unviable in a significant number of areas, leading to loss of services and increased pressure on other services.
<b>DR12</b>	Cyber security breach leads to loss of service user data and/or prolonged loss of key services.
<b>DR13</b>	Failure to comply with the legislative requirements set out in the General Data Protection Regulation and DPA 2018 negatively impacts the health budget due to statutory fines, and damages Departmental reputation.

**DR6:** The Department has a responsibility to ensure that adequate health and social care provision is available to citizens of NI in the event of any emergency. DoH is also the Lead Government Department (LGD) for responding to the health and social care consequences of emergencies from the following categories:-

- CBRNE (a Chemical, Biological, Radiological Nuclear or Explosive incident brought about either through terrorism, industrial accidents or by natural causes);
- Disruption of Medical Supply Chains;
- Human Infectious Diseases; and
- Mass Casualties.

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Identifier	Risk	Objective(s)	SRO	Risk Appetite	Assessment		Assessment		Action Planned, Target Date & Owner	Actions completed, Completion Date & Owner
					Residual Risk (Current)		Treated Risk (Target)			
					Overall Rating		Overall Rating			
					12 (High)		9 (Med)			
					Impact	Likelihood	Impact	Likelihood		
DR6	The health and social care sector may be unable to respond to the health and social care consequences of any emergency (including those for which the DoH is the Lead Government	DO1.1 DO1.2	M McBride	Open	4	3	3	3	<ul style="list-style-type: none"><li>Develop and review strategic frameworks on emergency preparedness and response policies in line with emerging UK policy and best practice. 31 December 2018. (CMO Group)</li><li>Review and develop pan flu preparedness in NI by participating in the UK Pandemic Flu Readiness Board and leading the CCG(NI) subgroup on pandemic flu in NI, in order to:</li></ul>	

1	2	3	4	5	6		7		8	9
Identifier	Risk	Objective(s)	SRO	Risk Appetite	Assessment Residual Risk (Current)		Assessment Treated Risk (Target)		Action Planned, Target Date & Owner	Actions completed, Completion Date & Owner
					Overall Rating		Overall Rating			
					12 (High)		9 (Med)			
					Impact	Likelihood	Impact	Likelihood		
	Department) due to inadequate planning and preparedness which could impact on the health and well-being of the population								<ul style="list-style-type: none"><li>- contribute to a UK Bill by 31 December 2018 (CMO Group)</li><li>- oversee development of pan flu guidance for NI incorporating primary, secondary and social care by June 2019 (CMO Group in partnership with policy G5s across DoH)</li><li>• Deliver a work programme to include Training, Testing and Exercising to ensure clear understanding of roles and responsibilities of key responders and familiarisation with key activities and processes. 31 March 2019 (CMO Group)</li><li>• Management of Health Countermeasure Stockpiles including replenishment, storage and distribution arrangements following NHS BSA cycling/ procurement changes.</li></ul>	