



Public Health
Agency

PHA Corporate Risk Register

Date of Review:
31 May 2020

Introduction

Managing risk is a key component of the wider governance agenda for the PHA. It is therefore essential that systems and processes are in place to identify and manage risks as far as reasonably possible.

The purpose of risk management is not to remove all risks but to ensure that risks are identified and their potential to cause loss fully understood. Based on this information, action can then be taken to direct appropriate levels of resource at controlling the risk or minimising the effect of potential loss.

The PHA has recognised the need to adopt such an approach and has a systematic and unified process in place to ensure a fully functioning risk register at both corporate and directorate levels as set out in the PHA Risk Management Strategy and Policy.

The Corporate Register that follows identifies corporate risks, all of which have been assessed using a 'five by five' risk grading matrix (see below) which is in line with DoH guidance. This ensures a consistent and uniform approach is taken in categorising risks in terms of their level of priority so that appropriate action can be taken at the appropriate level of the organisation.

IMPACT	Risk Quantification Matrix				
5 - Catastrophic	High	High	Extreme	Extreme	Extreme
4 – Major	High	High	High	High	Extreme
3 - Moderate	Medium	Medium	Medium	Medium	High
2 – Minor	Low	Low	Low	Medium	Medium
1 – Insignificant	Low	Low	Low	Low	Medium
LIKELIHOOD	A Rare	B Unlikely	C Possible	D Likely	E Almost Certain

Overview of Risk Register Review as at December 2019

Number of new risks identified	8
Number of risks removed from register	2
Number of risks where overall rating has been reduced	0
Number of risks where overall rating has been increased	0

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Corporate Risk		Lead Officer/s	Risk Grade	Page
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39	Cyber Security	Director of Operations	→ HIGH	9
42	Transformation Funding	Chief Executive	REMOVED	-
45	PHA Staffing Issues including Public Health Consultant Staff Vacancies (revised March 2019)	Chief Executive (with all Directors)	REMOVED	-
46	Failure to meet Statutory & Legal requirements in relation to Emergency Planning (EPRR)	Director of Public Health	→ HIGH	12
47	Connect – PHA Intranet	Director of Operations	→ HIGH	14
48	PHA Web / social media platforms: public facing	Director of Operations	HIGH	16
49	Finance – COVID 19 (allocation)	Director of Finance	HIGH	18
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51	Contact Tracing Service	Chief Executive/DPH	HIGH	20
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55	Public Health Staffing Issues	Director of Public Health	HIGH	26

Key:

Risk rating:

- ↑ increased from previous quarter
- ↓ decreased from previous quarter
- remained the same as previous quarter

Corporate Risk 26				
RISK AREA/CONTEXT: Delays in market testing health and social care contracts, as set out in the PHA Procurement Plan.				
DESCRIPTION OF RISK: The PHA has an extensive range of Health and Social Care contracts with non HSC providers (primarily health improvement contracts with voluntary and community sector). An approved PHA Procurement Plan is in place, and a range of large and smaller services have been procured. Some contracts are however rolled forward year on year, without the benefit of market testing. Full compliance with the PHA Procurement Plan has not been achieved due to limited capacity, skill constraints and the complexity of some contracts. It is therefore likely that the timescales in the current plan will not be met, with an additional challenge in respect of the requirement to re-procure the first contracts tendered by 2020. There is a risk that VFM is not being achieved in the current contracts and a potential reputational risk to the PHA.				DATE RISK ADDED: September 2012 (Amalgamated with Corporate Risk 28, September 2013) Revised June 2018
LINK TO ASSURANCE FRAMEWORK: Operational Performance and Service Improvement Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Possible	Moderate	MEDIUM	
LEAD OFFICER: Mrs Olive Macleod, Interim Chief Executive				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
Procurement Plan has been developed and agreed by AMT setting out the timescales for achieving the re-tendering of baseline contracts. Revised processes and documentation-developed for PHA in liaison with PALS to ensure tender process is applied where required in line with Procurement regulations. Suite of documentation and guidance for tendering in place.	Progress reports on implementing the Procurement Plan will be provided to PHA Procurement Board and annually to PHA board Leadership at AMT and Assistant Director level via PHA Procurement board.	Legacy contracts may not be providing value for money Limited capacity within BSO PALS Limited capacity and planning skills to undertake essential pre-procurement planning, business cases etc	Action Plan to implement the recommendations of the Task & Finish Group Report will continue to be taken forward during 2020/21. However, this will be impacted by staff priorities be re-focused on addressing Covid 19. Specific actions that will be prioritised Approach for providing Training for remaining staff in Planning and Procurement processes to be reviewed in light of Covid 19 working arrangements & delivered (September 2020)	Sept 2020

<p>Training has been provided for relevant staff, including legal aspects of procurement.</p> <p>Internal management structures established to oversee implementation of the Procurement Plan.</p> <p>Review of Procurement Plan and wider support requirements standing item on agenda of Procurement Board</p> <p>Review of procurement processes and future approach undertaken taking into account lessons learnt from experience over the past 3 years and the introduction of the new Procurement regulations in Feb 2015 and the introduction of a Light Touch Regime.</p> <p>Temporary arrangement from core OPs admin to support social care procurement, kept under review, with Director of Operations.</p> <p>PHA membership and attendance at HSCNI Regional Procurement Board</p>	<p>PIDs for larger procurements (including pre-procurement) brought to AMT and, where appropriate, PHA board.</p>		<ul style="list-style-type: none"> • Procurement Plan timelines to be reviewed in light of COVID 19 (June July 2020) • Revised re-tender plans for drug and alcohol / RSE /SHIP and Screening uptake service to be developed and approved by AMT (by August 2020). • Review of Contract Management Processes to be completed by September 2020 Re-convene PHA Procurement Board (July 2020) 	
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<p>Report of the Planning and Procurement Task and Finish Group approved by AMT and presented to PHA Board workshop in June 2019.</p> <p>Training for staff in planning and procurement processes initiated in Feb 2020.</p> <p>1 senior planning posts recruited</p>				
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Corporate Risk 39				
RISK AREA/CONTEXT: Cyber Security				
DESCRIPTION OF RISK: Information security across the HSC is of critical importance to delivery of care, protection of information assets and many related business processes. If a cyber incident should occur, without effective security and controls, HSC information, systems and infrastructure (including those used by the PHA, as well as Trusts providing services for the PHA) may become unreliable, not accessible when required (temporarily or permanently), or compromised by unauthorised 3 rd parties including criminals. This could result in significant business disruption. It could also lead to unauthorized access to any of our systems or information, theft of information or finances, breach of statutory obligations, substantial fines and significant reputational damage.				DATE RISK ADDED: June 2017
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Likely	Major	HIGH	
LEAD OFFICER: Mr E McClean, Deputy Chief Executive (interim) and Director of Operations				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
Technical Infrastructure: <ul style="list-style-type: none">• HSC security hardware (eg firewalls);• HSC security software (threat detection, antivirus, email & web filtering);• Server/client patching;• 3rd party Secure Remote Access;• Data & system backups• Regional funding provided & Sophos Intercept X &	Internal Audit/BSO ITS self-assessment against 10 Steps towards NCSC; Technical risks assessments and penetration tests; HSC SIRO Forum for shared learning and collaborative action planning and delivery; Reports to GAC/PHA board on reported incidents as appropriate.	Insufficient corporate recognition and ownership of cyber security threat as a service delivery risk Full extent of gaps are not understood at this point – a gap analysis regionally and by HSC organisations is required to capture a considered extent of vulnerabilities Insufficient User	BSO ITS provides PHA IT services. PHA will continue to work with BSO ITS, HSCB e-health and through the HSC SIRO forum Regional Cyber Security Programme Board has developed a draft incident management plan and handbook, with the intention of undertaking a desk top test across the region (late 2019/20 or early 20/21)	June 2020

<p>Sophos Sandstorm software & PKI hardware purchased & being installed.</p> <p>Policy, Process:</p> <ul style="list-style-type: none"> • Regional & local ICT/information security policies; • Data protection policy; • Change Control Processes; • User Account Management processes; • Disaster Recovery Plans; • Emergency Planning & Service/Business Continuity Plans; • Corporate Risk Management Framework, processes & monitoring; • Regional & local incident management & reporting policies & procedures; <p>User Behaviours – influenced through:</p> <ul style="list-style-type: none"> • Induction; • Mandatory Training; • HR Disciplinary Policy; • Contract of employment; • 3rd party contracts/data access agreements <p>PHA BCP tested and updated February 2018 with a focus on cyber security</p>		<p>Awareness of impact of personal behaviours in relation to cyber threat</p>		
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<p>PHA member of the Regional HSC Cyber Security Business Continuity Group</p> <p>BSO cyber security project manager co-ordinating regional cyber security work.</p> <p>Regional cyber security programme board (BSO representing PHA) taking forward actions arising from DXC report and recommendations Ongoing work being taken forward and overseen by the Regional Cyber Security Programme Board.</p> <p>Internal Audit of 'user behaviour' relating to cyber security (conducted January 2020) provided satisfactory assurance.</p>				
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Corporate Risk 46				
RISK AREA/CONTEXT: Failure to meet statutory & legal requirements in relation to Emergency Planning (EPRR)				
DESCRIPTION OF RISK: Disruption, loss of reputation, inefficient response, failure to meet statutory and legal requirements for Emergency Preparedness, Resilience and Response (EPRR) The PHA Health Protection Team has a statutory responsibility for emergency response. Inadequate mechanisms to financially compensate staff (across all pay bands) that are not on a service rota, has meant that staff are reluctant to participate in training or emergency response. This directly contributes to the following areas of risk for organisational resilience and emergency response; Inability to fully operationalise the Joint Response Emergency Plan. Absence of identified group of staff for activation of the Emergency Operation Centre Plan and vulnerability to organisational resilience for a sustained emergency response, management of an outbreak and pandemic response.				DATE RISK ADDED: April 2019
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Potentially all corporate objectives; particularly corporate objectives 4 (working together to ensure high quality services) and 5 (our organisation works effectively).				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Likely	Major	HIGH	
LEAD OFFICER: Professor Hugo Van Woerden, Director of Public Health				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Number of senior staff trained in emergency response (PHA,HSCB, BSO).The proposal for staff	<ul style="list-style-type: none">Reports to AMT.	<ul style="list-style-type: none">Availability for out of hours response.Sustaining an out of hours response.Compensation under	<ul style="list-style-type: none">Following learning from COVID-19 a further review of service business continuity plans and business impact analysis is required to	Sept 2020

payment has been agreed by HR, SMT/AMT and consultation completed with Trade Union colleagues.		AFC T&Cs for extended working hours.	<p>support the redeployment and training of staff to support an emergency response and maintaining the function of the EOC (in hours and out of hours). (March 2021)</p> <ul style="list-style-type: none"> Continue to work with HR to seek clarification and solution regarding payment and compensation for senior staff who are not on an on-call rota and who are involved in emergency response (Band 7 and above). (review Sept 2020) 	
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Corporate Risk 47				
RISK AREA/CONTEXT: Connect - PHA Intranet				
DESCRIPTION OF RISK: The PHA has been working with BSO ITS to redevelop the Connect Intranet site as a WordPress site that can be hosted and supported by BSO. Development has been slow due to a combination of factors including competing priorities within the ITS web development programme and ITS staff capacity. The site currently sits on an old unsupported version of Drupal and this means that the site is now operating at an increased risk of critical failure and non recovery which would negatively impact the operational efficiency of the PHA. Moving the site onto a more recent version of Drupal would be a significant workload commitment and largely nugatory given the pending transition to Wordpress for the ITS project. Furthermore, the site is hosted on Linode, a third party provider. Linode brought the site down in June which impacted on business continuity for 24 hours; while the site was restored there is potential for this to reoccur.				DATE RISK ADDED: June 2019
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Possible	Major	HIGH	
LEAD OFFICER: Mr E McClean, Deputy Chief Executive / Director of Operations				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Site maintained/managed under BT48 support contractWeekly backups of the current site are also conducted off site.Inclusion in Business Continuity planning	Work is progressing with BSO ITS on the development of a new intranet on the Wordpress platform. A new server has been employed by BSO ITS which has permitted additional functionality and capacity. Regular communication with BSO ITS is ongoing.	<ul style="list-style-type: none">It sits on an unsupported version of Drupal; the platform and application are insecure;It is hosted on Linode, a third party site which poses an additional risk;BT48 support is limited to low level maintenance	Work is ongoing with BSO ITS to reach a stage where it can be launched with an acceptable site map. Content migration completed. Transfer pending final migration review. Launch delayed due to COVID 19 response, existing intranet being used and updated. New intranet to be rolled out when resources allow. June 2020	June 2020

APPENDIX

RISKS ADDED TO THE CORPORATE RISK REGISTER AS AT 31 May 2020

Corporate Risk 48				
RISK AREA/CONTEXT: PHA Public Website				
DESCRIPTION OF RISK: The existing PHA public facing website has very restricted functional utility. This has proven to be a significant liability in the response to COVID-19 and has restricted significantly what can be hosted. It is essential for the PHA's messaging to have excellent contemporary functionality, be able to host dynamic content, digital presentations and plug-in directly other content/functionality from other PHA websites including new COVID 19 platforms. As the current website is at the end of its life there is increased and material risk in respect of support arrangements. Risk that key messages are not communicated and reputational risk for the PHA.				DATE RISK ADDED: March 2020
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Possible	Major	HIGH	
LEAD OFFICER: Mr E McClean, Deputy Chief Executive / Director of Operations				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Hosting, maintenance and updating services have been procured via an external provider (contract is due for procurement in year)	<ul style="list-style-type: none">Regular contact ongoing between Communications team and maintenance provider	<ul style="list-style-type: none">Level of functionality remains limited within the existing website and constrains our ability to more effectively communicate with key audiences. Latest research shows that shortcomings can	<ul style="list-style-type: none">Reprovision of PHA website. New web spec/business case to be developed and submitted Digital Health team for consideration/approval (by July 2020);Programme of maintenance and updating planned (ongoing);Procure re-development contract and take forward work to deliver new website on an alternative	September 2020

		<p>only be addressed by rebuilding the site</p> <ul style="list-style-type: none"> • No contingency arrangements in place 	<p>hosting platform which is supported via BSO/NICS in house (needs timescale)</p> <ul style="list-style-type: none"> • Recruit vacant web developer post (review Sept 2020) 	
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Corporate Risk 49				
RISK AREA/CONTEXT: Finance – COVID 19 (allocation)				
DESCRIPTION OF RISK: The requirement to respond rapidly to the developing coronavirus epidemic has resulted in expenditure being authorised and incurred before financial allocations are secured. There is a risk to financial stability if financial allocations subsequently made are not sufficient to cover expenditure commitments.				DATE RISK ADDED: May 2020
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Likely	major	HIGH	
LEAD OFFICER: Director of Finance				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Finance proformas required for COVID related expenditure – process to feed through HSC Silver to Gold for approvals.DOH finance also sighted on finance implications of COVID-19 related service proposals.Business case processes for major expenditure.	<ul style="list-style-type: none">Approvals of COVID-19 templated noted at GOLD, where financial consequences are noted.Monthly monitoring returns to DOH highlighting spend to date and forecast – COVID 19 related spend is highlighted separately.Finance reports will highlight extent of financial risk to PHA SMT/Board on regular basis.	<ul style="list-style-type: none">No allocation letters in advance of expenditure being committed.	<ul style="list-style-type: none">Monthly monitoring of spend separately identified.Level of financial risk highlighted to DOH and PHA board on regular basis.	End of June 2020

Corporate Risk 50				
RISK AREA/CONTEXT: Finance – COVID 19 (procurement)				
DESCRIPTION OF RISK: The requirement to respond rapidly to the developing coronavirus epidemic results in expenditure being incurred without due regard to the principles of Managing Public Money NI, leading to poor value for money, irregular expenditure and the potential for legal challenge.				DATE RISK ADDED:
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Likely	Major	High	
LEAD OFFICER: Director of Finance				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">• All Direct Award contracts (DACs) are reviewed by COPE.• Automated SODA process for approval of order/invoices• DACs require DOF/AO approval.	<ul style="list-style-type: none">• List of DACs reviewed regularly by GAC.• Normal DAC approvals have continued.	<ul style="list-style-type: none">• Normal procurement processes and timescales have been temporarily suspended in a number of cases.	<ul style="list-style-type: none">• Review DACs awarded during COVID-19 timescales to determine extent of commitment and if it can be replaced with full procurement.• Monitor expenditure for unusual variances that cannot be explained.	

Corporate Risk 51				
RISK AREA/CONTEXT: Contact Tracing Service				
DESCRIPTION OF RISK: The PHA has been tasked with the rapid establishment of a COVID 19 Contact Tracing Service. Failure to fully implement an appropriate Contact Tracing service, with the capacity to scale up and down, within the necessary timescale will result in an inability to control and prevent community transmission of COVID 19, leading to increased deaths and a surge in activity that the HSC would not have the capacity to cope with. PHA would also face significant reputational damage.				DATE RISK ADDED: May 2020
LINK TO ASSURANCE FRAMEWORK: Operational Performance and Service Improvement Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: All Health and Wellbeing Services should be Safe and High Quality (4)				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Possible	Major	High	
LEAD OFFICER: CX (or DPH?)				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Relevant senior PHA staff represented on the Contact Tracing Steering Group (chaired by Dr L Mitchell and Mr A Findlay on behalf of the DoH);Programme lead overseeing all elements;Interim Contact Tracing Centre Manager appointed.PHA staff represented on the Digital TTIS Steering Group	<ul style="list-style-type: none">Reports to Departmental Oversight Group (chaired by CMO, the SRO for Contact Tracing) through Chief Executive and CT Steering Group Chair;Reports to PHA Board through the Chief Executive	<ul style="list-style-type: none">Complexity of digital and manual systems to be developed in a very tight timescale;Uncertainties & unknowns regarding COVID 19	<ul style="list-style-type: none">BC for funding for staffing, accommodation & G&S submitted & waiting approval of funding (expected by 19/6/20);Accommodation identified; BC approved (see re funding above), & preparatory work underway (expected complete by 22/6/20);Recruitment underway (review 30/6/20);Work underway with Digital Health to ensure CRM & analytics for tier 1 & 2 contact tracing, digital self trace system & proximity app (review 30 June 2020);	30 June 2020

			<ul style="list-style-type: none"> • Work underway to establish tier 3 call centre provided by NIDirect, through DoH MOU (29 June 2020); • Extensive communications programme (including engagement with MLAs, and key sectors including human rights, equality, older people & children's commissioners) (review 30 June 2020) 	
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Corporate Risk 52				
RISK AREA/CONTEXT: Information Governance				
DESCRIPTION OF RISK: As a result of the COVID 19 PHA has been required to collect and hold significant new personal identifiable data. There has also been a requirement to put in place new arrangements for data sharing with other bodies. There is a risk that given the scale, especially of the testing and contact tracing services, the need to establish new digital and manual systems and services rapidly, and the complexity of interfaces with other bodies (including the DoH and DHSC and NHSX), that all GDPR principles are not fully complied with, with the potential for a data breach, and/or reputational or financial consequences for the PHA as a result.				DATE RISK ADDED: May 2020
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	possible	major	High	
LEAD OFFICER: Director of Public Health				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">• PHA Data Protection Policy;• PHA Data Protection Impact Assessment Policy and Guidelines;• Established processes in PHA, including Health Protection;• Existing training programme for all PHA staff and IAOs• Engagement with the PHA DPO and information governance team;• Information Governance Workstream established	<ul style="list-style-type: none">• DPO attends Contact Tracing Steering Group & chairs the IG Workstream;• PHA SIRO and PDG attend & report to AMT and PHA Board	<ul style="list-style-type: none">• Speed of implementation resulting in less time to consider & implement IG measures;• Complexity of data flows & lack of clarity about ownership;	<ul style="list-style-type: none">• DPIA for testing programme being developed to be complete by 22/6/20;• DPIA for manual contact tracing & digital self trace being developed (by end June 2020);• PNs for contact tracing to be published (June 2020);• MOU between Health Protection, HSCTs, HSCB and BSO reviewed (by 22 June 2020);• All staff for the contact centre (tier 1 & 2, permanent and bank) to complete IG training (on-going as recruited);	30 June 2020

under the CT Steering Group; • Close working & regular liaison between PHA DPO and DoH DPO; • Engagement with ICO • DPIA for contact tracing pilot completed; • PN for testing on PHA website; • PHA represented at 4 Nations IG meetings			•	
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Corporate Risk 53				
RISK AREA/CONTEXT: Corporate Priorities				
DESCRIPTION OF RISK: There is a risk, that due to COVID 19, the PHA may not be able to deliver on its key objectives. Firstly as a result of the need to refocus staff to prioritise work in response to the COVID 19 pandemic, including planning for and putting measures in place to help prevent/minimise the impact of a second wave. As a result it has not been possible to take forward all other areas of PHA business. There is therefore a risk that the PHA will not be able to deliver on its key objectives				DATE RISK ADDED: May 2020
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: All objectives				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	likely	major	HIGH	
LEAD OFFICER: Chief Executive				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Corporate summary of all Directorate COVID 19 and 'rebuilding' priorities prepared.Discussion with CMO at SRM;Director meetings with Chief Executive;Director meetings with their senior teams	<ul style="list-style-type: none">Discussion at AMTReports from AMT/Chief Executive to PHA Board	<ul style="list-style-type: none">Limited capacity to take forward some core work.	<ul style="list-style-type: none">Development of revised ABP 2020/21 identifying priorities for remaining 9 months (July 2020)AMT/Board workshops to agree priorities for year ahead (on-going);Development of new 5 year Corporate Plan (March 2021)	Sept 2020

Corporate Risk 54				
RISK AREA/CONTEXT: Ability of 3 rd Party Providers to Deliver Commissioned Services				
DESCRIPTION OF RISK: In order to deliver on its corporate objectives, the PHA commissions many 3 rd party providers to deliver a wide range of services. As well as Trusts and local government, many services are provided by a large number of voluntary, community and private organisations. As a result of COVID 19, including the economic consequences, some of these organisations may no longer be able to deliver services (in whole or in part), with the risk that PHA may not be able to deliver the necessary services to achieve its corporate objectives.				DATE RISK ADDED: May 2020
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: All objectives				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	possible	major	High	
LEAD OFFICER: Director of Public Health and Director of Nursing/AHP				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Continuation of existing performance management arrangements;On-going dialogue with providers	Reports to AMT and PHA board	<ul style="list-style-type: none">Services may not be delivered, resulting in greater inequalities;Funding may be allocated with no/less service delivered	<ul style="list-style-type: none">Contract managers to review all contracts	Sept 2020

Corporate Risk 55				
RISK AREA/CONTEXT: Public Health Staffing Issues				
DESCRIPTION OF RISK: The Public Health Directorate has a number of vacancies in key areas as well as a number of posts filled on a temporary basis. In the Health Improvement Division, 46% of posts are filled on a temporary basis. The vacancies, and the increasing demands, particularly due to the impact of COVID-19, work to rebuild services and the transformation agenda mean that the existing staff resources are stretched significantly in a number of areas. The number of temporary staff adds further instability. This is not a sustainable position, with constrained capacity in a number of key areas and functions, potential delays taking forward new initiatives, the potential for significant issues to be missed, reduced organisational resilience at times of pressure or emergency limited ability to respond adequately to and deliver on statutory responsibilities and the personal strain on individuals, with the potential for increased sickness absenteeism and further loss of staff.				DATE RISK ADDED: June 2020
LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Potentially all corporate objectives; particularly corporate objectives 4 (working together to ensure high quality services) and 5 (our organisation works effectively).				
GRADING		LIKELIHOOD	IMPACT	RISK GRADE
		Likely	Major	HIGH
LEAD OFFICER: Director of Public Health				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Contact has been made with individuals working elsewhere to see if they would consider applying for any of the public health consultant posts.Funding was made available for 2 additional public health trainee posts in 2019.	<ul style="list-style-type: none">Reports to AMT.Updates to GAC via Corporate Risk registerBriefing provided to PHA Board.	<ul style="list-style-type: none">Number of temporary posts.Skill mix issuesDelays in HR/RSSS recruitment processLength of time for JD evaluations to be returned to recruiter, & lack of	<ul style="list-style-type: none">Public Health Directorate continue to look at other options with HR to recruit public health specialists (September 2020)Business cases are being developed for additional resource to support appointment of required additional capacity (September 2020)	September 2020

<ul style="list-style-type: none"> • Action Plan developed (in respect of all PHA staffing), approved by AMT, and agreed with DoH • Arrangements for non-medical PH trainee (from Feb 2020) • New permanent & locum consultants commenced between December 2019 and February 2020. • Development and implementation of 'Retire & Return' policy – 2/3 Consultants • Additional temporary posts offered to retired Public Health Consultants (7 posts) • A number of staff external to PHA have been engaged to support work associated with COVID-19 contact tracing, project delivery etc • Some PHA have been redeployed to support COVID-19 where they had particular skills relevant to the response to the pandemic (eg from nursing, project management, data analysis, communications etc) 		communication, leading to further delays in recruitment.	<ul style="list-style-type: none"> • Ongoing prioritisation of work and reflecting capacity in the development of PHA Annual Business Plan (September 2020) • Continue to review and take forward actions agreed with DoH (on-going) • Work with HR to progress any recruitment delayed as a result of COVID-19 (September 2020). 	
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APPENDIX

RISKS REMOVED FROM CORPORATE RISK REGISTER AS AT 31 March 2020

Corporate Risk 42				
RISK AREA/CONTEXT: Transformation Funding – REMOVE RISK. Transformation Funding has ended. Any issues regarding funding to be recorded under normal finance procedures and under relevant Directorate Risk Register as appropriate.				
DESCRIPTION OF RISK: Insufficient budget to cover Transformation projects that have been shown to have a positive impact on a recurring basis. This includes the staffing and work programme of HSCQI.				DATE RISK ADDED: June 2018
LINK TO ASSURANCE FRAMEWORK: Operational Performance and Service Improvement Dimension				
LINK TO ANNUAL BUSINESS PLAN 2019/20: Potentially all Corporate objectives, particularly Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Likely	Major	HIGH	
LEAD OFFICER: Mrs Olive Macleod, Interim Chief Executive				
Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none">Chief Executive and Executive Directors engaged in discussion with DoHFinance reports to AMT and PHA boardDoH approved bids in respect of the transformation monies allocatedOn-going performance managementReporting to DoH SROs	<ul style="list-style-type: none">Finance reports to AMT and PHA boardStanding item and regular progress reports to AMTRegular discussion at AMT/SMT joint meetings to ensure maximum appropriate alignment between PHA and HSCBRegular briefings to board members	<p>Potential that full implementation may not be possible and n/r transformation budget may not be fully used.</p> <p>cient budget to continue programmes and posts</p>	<p>Ongoing discussion at AMT and senior level within PHA (to be reviewed March 2020.</p> <p>Discussion ongoing with DoH, including regarding cessation or measures to continue where appropriate(to be reviewed March 2020.</p> <p>PHA leads progressing each of the funded programmes/projects review March 2020</p> <p>(As year 1 of transformation funding ended & moving into year 2, ongoing review & oversight date</p>	<p>March</p> <p>June 2020</p>

			<p>now 2020.)</p> <p>DoH has asked that these be continued where there is evidence to show they are having a positive impact.</p> <p>Subsequently DoH advised that no additional funding has been allocated to PHA in 2020/21 for Transformation programmes. PHA will review its overall budget position (Programme & Management & Admin) for 2020/21 and identify in its Investment Plan what Transformation programmes can be supported with the funding available (June 2020) through service redesign or securing funding through mainstream HSC service commissioning.</p> <p>Associated posts within the PHA will have to be reviewed by June 2020</p>	
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Corporate Risk 45

RISK AREA/CONTEXT: PHA Staffing Issues – Remove from Risk Register, as many of the issues have been resolved or needs changed. Each Director to review their own staffing position, and include any remaining risk, on their Directorate Risk Register. Where appropriate Directorate risks can be escalated to the Corporate Risk Register.

DESCRIPTION OF RISK:

The PHA had a number of vacancies in key areas as well as posts filled on a temporary basis across all Directorates and at all levels of the organisation. This related to Public Health Consultants in particular as well as other key posts in Nursing/AHP and Operations.

The vacancies, and the increasing demands, particularly due to the impact of COVID-19, mean that the existing staff resources are stretched significantly in a number of areas and the number of temporary staff adds further instability. This is not a sustainable position, with constrained capacity in a number of key areas and functions, potential delays taking forward new initiatives, the potential for significant issues to be missed, reduced organisational resilience at times of pressure or emergency limited ability to respond adequately to and deliver on statutory responsibilities and the personal strain on individuals, with the potential for increased sickness absenteeism and further loss of staff.

DATE RISK ADDED:

October 2018

Revised March 2019

LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension

LINK TO ANNUAL BUSINESS PLAN 2019/20: Potentially all corporate objectives; particularly corporate objectives 4 (working together to ensure high quality services) and 5 (our organisation works effectively).

GRADING	LIKELIHOOD	IMPACT	RISK GRADE
	Likely	Major	HIGH

LEAD OFFICER: Chief Executive (with all Directors)

Existing Controls	Internal and External Assurances to the Board	Gaps in Controls and Assurances	Action Plan/Comments/ Timescale	Review Date
<ul style="list-style-type: none"> Contact has been made with individuals working elsewhere to see if they would consider applying for any of the public health 	<ul style="list-style-type: none"> Reports to AMT. PHA/DoH working group established. Updates to GAC via Corporate Risk register Briefing provided to PHA 	<ul style="list-style-type: none"> Number of temporary posts. Skill mix issues Delays in HR/RSSS recruitment process Length of time for JD 	<ul style="list-style-type: none"> Public Health Directorate continue to look at other options with HR to recruit public health specialists as we cannot fill the vacant Consultant posts by 31 December 2019 	March 2020

<p>consultant posts.</p> <ul style="list-style-type: none"> • Funding has been made available for 2 additional public health trainee posts in 2019. • Action Plan developed, approved by AMT, and approved by DoH Arrangements for non-medical PH trainee (from Feb 2020) • PH Consultant interviews (Nov 2019) – successful, new permanent & locum consultants commenced between December 2019 and February 2020. • One Senior Planning Manager appointed. • Development and implementation of 'Retire & Return' policy – 2/3 Consultants • Additional temporary posts offered to retired Public Health Consultants (7 posts) • A number of staff from outside the PHA have been engaged to support work associated with COVID-19 contact tracing, project delivery etc • Some PHA staff have been redeployed to support COVID-19 where they had particular skills relevant to the 	<p>Board.</p>	<p>evaluations to be returned to recruiter, & lack of communication, leading to further delays in recruitment.</p>	<ul style="list-style-type: none"> • Business cases -are being developed to use programme funds to support appointment of additional non-consultant screening (to AMT by March 2020) and Health Protection staff (with DoH awaiting approval – March 2020) Ongoing prioritisation of work and reflecting capacity in the development of PHA Annual Business Plan (September 2020) • Planned recruitment of additional planning staff to address skill mix issues to support all PHA directorates (Jan 2020); • Continue to review and take forward actions agreed with DoH (review September 2020 after next meeting) • External support commissioned via Leadership Centre to take forward PHA HR & OD Strategy (March- Sept 2020) • Permanent and locum consultants have been appointed, one started with HP in December 2019 and two others are due to start in February/March 2020. <p>Due to the ongoing COVID-19 response further recruitment has been delayed due to the pandemic. The HP service is looking to appoint further staff in the future (review September 2020).</p>	
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response to the pandemic (eg from nursing, project amangement, data analysis, communications etc)				
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