



Public Health  
Agency

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# PHA Corporate Risk Register

**Date of Review:**  
**31 August 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				
	High	High	Extreme	Extreme	Extreme
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 August 2020

Number of new risks identified	3
Number of risks removed from register	2
Number of risks where overall rating has been reduced	1
Number of risks where overall rating has been increased	0

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Key:

Risk rating:

↑ increased from previous quarter

↓ decreased from previous quarter

→ remained the same as previous quarter



Corporate Risk 26				
<b>RISK AREA/CONTEXT:</b> Delays in market testing health and social care contracts, as set out in the PHA Procurement Plan.				
<b>DESCRIPTION OF RISK:</b> 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 reprocore 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.				<b>DATE RISK ADDED:</b> September 2012 (Amalgamated with Corporate Risk 28, September 2013) Revised June 2018
<b>LINK TO ASSURANCE FRAMEWORK:</b> Operational Performance and Service Improvement Dimension				
<b>LINK TO ANNUAL BUSINESS PLAN 2019/20:</b> Corporate Objective 5 Our Organisation Works Effectively				
<b>GRADING</b>	<b>LIKELIHOOD</b>	<b>IMPACT</b>	<b>RISK GRADE</b>	
	Possible	Moderate	MEDIUM	
<b>LEAD OFFICER:</b> Mrs Olive Macleod, Interim Chief Executive				
<b>Existing Controls</b>	<b>Internal and External Assurances to the Board</b>	<b>Gaps in Controls and Assurances</b>	<b>Action Plan/Comments/ Timescale</b>	<b>Review Date</b>

<p>Procurement Plan has been developed and agreed by AMT setting out the timescales for achieving the re-tendering of baseline contracts.</p> <p>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.</p>	<p>Progress reports on implementing the Procurement Plan will be provided to PHA Procurement Board and annually to PHA board</p> <p>Leadership at AMT and Assistant Director level via PHA Procurement board.</p>	<p>Legacy contracts may not be providing value for money</p> <p>Limited capacity within BSO PALS</p> <p>Limited capacity and planning skills to undertake essential preprocurement planning, business cases etc</p>	<p>Action Plan to implement the recommendations of the Task &amp; 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.</p> <ul style="list-style-type: none"> <li>Procurement Plan timelines to be <b>continually</b> reviewed in light of COVID 19 (<b>November</b> 2020)</li> <li>Revised re-tender plans for drug and alcohol / RSE /SHIP and Screening uptake service to be <b>taken forward in line with agreed</b></li> </ul>	<p><b>Dec 2020</b></p>
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<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"> <li>timelines to be approved by PHA Procurement Board (November 2020)</li> </ul> <p>Review of Contract Management Processes to be completed by December 2020 However, delay due to staffing priorities being re-directed to manage repurposing of existing contracts to address Covid 19 pressures may impact on this.</p>	
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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. 80 senior staff attended prior to Covid 19 impacting in March 2020. All key staff currently engaged in Procurements have been trained. Training slides are available on Connect via business manual and contact details for advice and support.</p> <p>2 senior planning posts recruited</p> <p>DACs in place to extend drugs &amp; alcohol, SHIP, RSE and screening uptake services in line with revised procurement timelines (into 2021)</p>				
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## Corporate Risk 39

**RISK AREA/CONTEXT:** Cyber Security

<b>DESCRIPTION OF RISK:</b> 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 <sup>rd</sup> 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.				<b>DATE RISK ADDED:</b>  June 2017
<b>LINK TO ASSURANCE FRAMEWORK:</b> Corporate Control Arrangements Dimension				
<b>LINK TO ANNUAL BUSINESS PLAN 2019/20:</b> Corporate Objective 5 Our Organisation Works Effectively				
<b>GRADING</b>	<b>LIKELIHOOD</b>	<b>IMPACT</b>	<b>RISK GRADE</b>	
	Likely	Major	HIGH	
<b>LEAD OFFICER:</b> Mr E McClean, Deputy Chief Executive (interim) and Director of Operations				
<b>Existing Controls</b>	<b>Internal and External Assurances to the Board</b>	<b>Gaps in Controls and Assurances</b>	<b>Action Plan/Comments/ Timescale</b>	<b>Review Date</b>
<b>Technical Infrastructure:</b> <ul style="list-style-type: none"><li>• HSC security hardware (eg firewalls);</li><li>• HSC security software (threat detection, antivirus, email &amp; web filtering);</li><li>• Server/client patching;</li><li>• 3<sup>rd</sup> party Secure Remote Access;</li><li>• Data &amp; system backups</li><li>• Regional funding provided &amp; Sophos Intercept X &amp;</li></ul>	Internal Audit/BSO ITS selfassessment 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)	Dec 2020

			Regional IT Security training has been refreshed and will be launched	
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<p>Sophos Sandstorm software &amp; PKI hardware purchased &amp; being installed.</p> <p><b>Policy, Process:</b></p> <ul style="list-style-type: none"> <li>• Regional &amp; local ICT/information security policies;</li> <li>• Data protection policy;</li> <li>• Change Control Processes;</li> <li>• User Account Management processes;</li> <li>• Disaster Recovery Plans;</li> <li>• Emergency Planning &amp; Service/Business Continuity Plans;</li> <li>• Corporate Risk Management Framework, processes &amp; monitoring;</li> <li>• Regional &amp; local incident management &amp; reporting policies &amp; procedures;</li> </ul> <p><b>User Behaviours – influenced through:</b></p> <ul style="list-style-type: none"> <li>• Induction;</li> <li>• Mandatory Training;</li> <li>• HR Disciplinary Policy;</li> <li>• Contract of employment;</li> <li>• 3<sup>rd</sup> party contracts/data access agreements</li> </ul> <p>PHA BCP tested and updated February 2018 with a focus on</p>		<p>Awareness of impact of personal behaviours in relation to cyber threat</p>	<p>early September 2020. To be reviewed Dec 2020</p>	
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cyber security				
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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)

<b>DESCRIPTION OF RISK:</b> 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.				<b>DATE RISK ADDED:</b> April 2019	
<b>LINK TO ASSURANCE FRAMEWORK:</b> Corporate Control Arrangements Dimension					
<b>LINK TO ANNUAL BUSINESS PLAN 2019/20:</b> Potentially all corporate objectives; particularly corporate objectives 4 ( working together to ensure high quality services) and 5 (our organisation works effectively).					
<b>GRADING</b>		<b>LIKELIHOOD</b>	<b>IMPACT</b>	<b>RISK GRADE</b>	
		Likely	Moderate	HIGH-MEDIUM	
<b>LEAD OFFICER:</b> Professor Hugo Van Woerden, Director of Public Health					
<b>Existing Controls</b>		<b>Internal and External Assurances to the Board</b>	<b>Gaps in Controls and Assurances</b>	<b>Action Plan/Comments/ Timescale</b>	<b>Review Date</b>
<ul style="list-style-type: none"><li>Number of senior staff trained in emergency response (PHA,HSCB, BSO).</li><li>The proposal for staff payment has been agreed</li></ul>		<ul style="list-style-type: none"><li>Reports to AMT.</li></ul>	<ul style="list-style-type: none"><li>Availability for out of hours response.</li><li>Sustaining an out of hours response.</li><li>Compensation under AFC T&amp;Cs for</li></ul>	<ul style="list-style-type: none"><li>Following learning from COVID-19 a further review of service business continuity plans and business impact analysis is required to support the redeployment</li></ul>	Dec 2020

by HR, SMT/AMT and consultation completed with Trade Union colleagues.		extended working hours.	<p>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"> <li>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 8a and above). (review Dec 2020)</li> </ul>	
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#### Corporate Risk 47

##### RISK AREA/CONTEXT:

Connect – PHA Intranet

<b>DESCRIPTION OF RISK:</b> 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.				<b>DATE RISK ADDED:</b> June 2019	
<b>LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension</b>					
<b>LINK TO ANNUAL BUSINESS PLAN 2019/20:</b> Corporate Objective 5 Our Organisation Works Effectively					
<b>GRADING</b>		<b>LIKELIHOOD</b>	<b>IMPACT</b>	<b>RISK GRADE</b>	
		Possible	Major	HIGH	
<b>LEAD OFFICER:</b> Mr E McClean, Deputy Chief Executive / Director of Operations					
<b>Existing Controls</b>	<b>Internal and External Assurances to the Board</b>	<b>Gaps in Controls and Assurances</b>	<b>Action Plan/Comments/ Timescale</b>		<b>Review Date</b>
<ul style="list-style-type: none"><li>Site maintained/managed under BT48 support contract</li><li>Weekly backups of the current site are also conducted off site.</li><li>Inclusion in Business Continuity planning</li></ul>	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"><li>It sits on an unsupported version of Drupal; the platform and application are insecure;</li><li>It is hosted on Linode, a third party site which poses an additional risk;</li><li>BT48 support is limited to low level maintenance</li></ul>	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. Review Dec 2020		Dec 2020

Corporate Risk 48				
RISK AREA/CONTEXT: PHA Public Website				
<b>DESCRIPTION OF RISK:</b> 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.				<b>DATE</b> <b>RISK</b> <b>ADDED:</b> March 2020
<b>LINK TO ASSURANCE FRAMEWORK: Corporate Control Arrangements Dimension</b>				
<b>LINK TO ANNUAL BUSINESS PLAN 2019/20:</b> Corporate Objective 5 Our Organisation Works Effectively				
GRADING	LIKELIHOOD	IMPACT	RISK GRADE	
	Possible	Major	HIGH	
<b>LEAD OFFICER:</b> 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"> <li>• Hosting, maintenance and updating services have been procured via an external provider (contract is due for procurement in year)</li> <li>• New web spec/business case developed and submitted Digital Health team for consideration/approval</li> </ul>	<ul style="list-style-type: none"> <li>• Regular contact ongoing between Communications team and maintenance provider</li> </ul>	<ul style="list-style-type: none"> <li>• 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 only be addressed by rebuilding the site</li> <li>• No contingency arrangements in place</li> </ul>	<ul style="list-style-type: none"> <li>• Programme of maintenance and updating planned (ongoing);</li> <li>• Procure re-development contract and take forward work to deliver new website on an alternative hosting platform which is supported via BSO/NICS in house (review Dec 2020)</li> <li>• Recruit vacant web developer post (review Dec 2020)</li> </ul>	Dec 2020



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"> <li>Finance proformas required for COVID related expenditure – process to feed through HSC Silver to Gold for approvals.</li> <li>DOH finance also sighted on finance implications of COVID-19 related service proposals.</li> <li>Business case processes for major expenditure.</li> </ul>	<ul style="list-style-type: none"> <li>Approvals of COVID-19 templated noted at GOLD, where financial consequences are noted.</li> <li>Monthly monitoring returns to DOH highlighting spend to date and forecast – COVID 19 related spend is highlighted separately.</li> <li>Finance reports will highlight extent of financial risk to PHA SMT/Board on regular basis.</li> <li>COVID templates now being manage through central finance resource in HSCB, to ensure appropriate scrutiny.</li> </ul>	<ul style="list-style-type: none"> <li>No allocation letters in advance of expenditure being committed.</li> </ul>	<ul style="list-style-type: none"> <li>Monthly monitoring of spend separately identified.</li> <li>Level of financial risk highlighted to DOH and PHA board on regular basis.</li> </ul> <p>Actions to be reviewed Dec 2020</p>	Dec 2020
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## 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
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	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"><li>• All Direct Award contracts (DACs) are reviewed by COPE.</li><li>• Automated SODA process for approval of order/invoices</li><li>• DACs require DOF/AO approval.</li></ul>	<ul style="list-style-type: none"><li>• List of DACs reviewed regularly by GAC.</li><li>• Normal DAC approvals have continued.</li></ul>	<ul style="list-style-type: none"><li>• Normal procurement processes and timescales have been temporarily suspended in a number of cases.</li></ul>	<ul style="list-style-type: none"><li>• Review DACs awarded during COVID-19 timescales to determine extent of commitment and if it can be replaced with full procurement. December 2020</li><li>• Monitor expenditure for unusual variances that cannot be explained. December 2020</li></ul>	Dec 2020

## 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 and 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"><li>• 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);</li><li>• Programme lead overseeing all elements;</li><li>• Interim Contact Tracing Centre Manager appointed.</li><li>• PHA staff represented on the Digital TTIS Steering Group</li><li>• Accommodation business case approved and funding allocated. License signed for County Hall accommodation and</li></ul>	<ul style="list-style-type: none"><li>• Reports to Departmental Oversight Group (chaired by CMO, the SRO for Contact Tracing) through Chief Executive and CT Steering Group Chair;</li><li>• Reports to PHA Board through the Chief Executive</li></ul>	<ul style="list-style-type: none"><li>• Complexity of digital and manual systems to be developed in a very tight timescale;</li><li>• Uncertainties &amp; unknowns regarding COVID 19</li></ul>	<ul style="list-style-type: none"><li>• BC for funding for staffing, accommodation &amp; G&amp;S submitted &amp; waiting approval of funding (expected by 30/09/20);</li><li>• Recruitment continuing for additional staff (review 31/12/20);</li><li>• Work underway with Digital Health to ensure analytics for tier 1 &amp; 2 contact tracing, digital self trace system (review Dec 2020);</li><li>• Extensive communications programme continues taking account of changing developments (review Dec 2020)</li></ul>	Dec 2020
<p>CTS operationg from the facilty July 2020.</p> <ul style="list-style-type: none"><li>• Work of the CTS supported by DoH STOPCOVIDNI (proximity) app</li><li>• Dynamics CRM operational in CTS</li><li>• Tier 3 call centre (provided by NIDirect) operational (through DoH MOU)</li></ul>				

<ul style="list-style-type: none"> <li>Extensive communication programme with MLAs and key sectors including human rights, equality, older people and children's commissioners)</li> </ul>				
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Corporate Risk 52				
RISK AREA/CONTEXT: Information Governance				
<b>DESCRIPTION OF RISK:</b> 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.				<b>DATE RISK ADDED:</b> 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"> <li>• PHA Data Protection Policy;</li> <li>• PHA Data Protection Impact Assessment Policy and Guidelines;</li> <li>• Established processes in PHA, including Health Protection;</li> <li>• Existing training programme for all PHA staff and IAOs</li> <li>• Engagement with the PHA DPO and information governance team;</li> <li>• Information Governance Workstream established</li> </ul>	<ul style="list-style-type: none"> <li>• DPO attends Contact Tracing Steering Group &amp; chairs the IG Workstream;</li> <li>• PHA SIRO and PDG attend &amp; report to AMT and PHA Board</li> </ul>	<ul style="list-style-type: none"> <li>• Speed of implementation resulting in less time to consider &amp; implement IG measures;</li> <li>• Complexity of data flows &amp; lack of clarity about ownership;</li> </ul>	<ul style="list-style-type: none"> <li>• DPIA for testing programme being developed to be completed (<a href="#">review Nov 2020</a>)</li> <li>• DPIA for manual contact tracing &amp; digital self trace being developed. <a href="#">To be submitted to ICO w/c 7/9/20</a></li> <li>• All staff for the contact centre (tier 1 &amp; 2, permanent and bank) to complete IG training (on-going as recruited);</li> <li>• <a href="#">DPIA to be completed for analytics platform currently in development (November 2020);</a></li> <li>• <a href="#">DPIA to be completed for digital-</a></li> </ul>	Dec 2020
<p>under the CT Steering Group;</p> <ul style="list-style-type: none"> <li>• Close working &amp; regular liaison between PHA DPO and DoH DPO;</li> <li>• Engagement with ICO</li> <li>• DPIA for contact tracing pilot completed;</li> <li>• PN for testing on PHA website;</li> <li>• PHA represented at 4 Nations IG meetings</li> <li>• <a href="#">PN for Contact Tracing published on PHA website</a></li> <li>• <a href="#">MOU between PHA Health Protection, HSCB, BSO and HSC Trusts updated and approved (June 2020)</a></li> </ul>			<a href="#">self trace system (November 2020)</a>	



Corporate Risk 53				
RISK AREA/CONTEXT: Corporate Priorities				
<b>DESCRIPTION OF RISK:</b> 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				<b>DATE RISK ADDED:</b> 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"><li>Corporate summary of all Directorate COVID 19 and 'rebuilding' priorities prepared.</li><li>Discussion with CMO at SRM;</li><li>Director meetings with Chief Executive;</li><li>Director meetings with their senior teams</li></ul>	<ul style="list-style-type: none"><li>Discussion at AMT</li><li>Reports from AMT/Chief Executive to PHA Board</li></ul>	<ul style="list-style-type: none"><li>Limited capacity to take forward some core work.</li></ul>	<ul style="list-style-type: none"><li>Development of revised ABP 2020/21 identifying priorities for remaining 9 months Delayed due to COVID 19 – Oct 2020</li><li>AMT/Board workshops to agree priorities for year ahead (ongoing);</li><li>Development of new 5 year Corporate Plan (March 2021)</li></ul>	Dec 2020

**Corporate Risk 54****RISK AREA/CONTEXT:** Ability of 3<sup>rd</sup> Party Providers to Deliver Commissioned Services

**DESCRIPTION OF RISK:** In order to deliver on its corporate objectives, the PHA commissions many 3<sup>rd</sup> 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"> <li>Continuation of existing performance management arrangements;</li> <li>On-going dialogue with providers</li> </ul>	Reports to AMT and PHA board	<ul style="list-style-type: none"> <li>Services may not be delivered, resulting in greater inequalities;</li> <li>Funding may be allocated with no/less service delivered</li> </ul>	<ul style="list-style-type: none"> <li>Contract managers to review all contracts (ongoing – review Dec 2020)</li> </ul>	Dec 2020

**Corporate Risk 55**

<b>RISK AREA/CONTEXT:</b> Public Health Staffing Issues				
<b>DESCRIPTION OF RISK:</b> 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.				<b>DATE RISK ADDED:</b> June 2020
<b>LINK TO ASSURANCE FRAMEWORK:</b> Corporate Control Arrangements Dimension				
<b>LINK TO ANNUAL BUSINESS PLAN 2019/20:</b> Potentially all corporate objectives; particularly corporate objectives 4 ( working together to ensure high quality services) and 5 (our organisation works effectively).				
<b>GRADING</b>	<b>LIKELIHOOD</b>	<b>IMPACT</b>	<b>RISK GRADE</b>	
	Likely	Major	HIGH	
<b>LEAD OFFICER:</b> Director of Public Health				
<b>Existing Controls</b>	<b>Internal and External Assurances to the Board</b>	<b>Gaps in Controls and Assurances</b>	<b>Action Plan/Comments/ Timescale</b>	<b>Review Date</b>



<ul style="list-style-type: none"> <li>• Contact has been made with individuals working elsewhere to see if they would consider applying for any of the public health consultant posts.</li> <li>• Funding was made available for 2 additional public health trainee posts in 2019.</li> <li>• Action Plan developed (in respect of all PHA staffing), approved by AMT, and</li> </ul>	<ul style="list-style-type: none"> <li>• Reports to AMT.</li> <li>• Updates to GAC via Corporate Risk register</li> <li>• Briefing provided to PHA Board.</li> </ul>	<ul style="list-style-type: none"> <li>• Number of temporary posts.</li> <li>• Skill mix issues</li> <li>• Delays in HR/RSSS recruitment process Length of time for JD evaluations to be returned to recruiter, &amp; lack of communication, leading to further delays in</li> </ul>	<ul style="list-style-type: none"> <li>• Public Health Directorate continue to look at other options with HR to recruit public health specialists (December 2020)</li> <li>• Business case has been developed to take forward an enhanced health protection service to ensure there is the expertise and system wide resilience created to deal with the long term impact of Covid 19 and to plan for and manage</li> </ul>	December 2020
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<p>agreed with DoH</p> <ul style="list-style-type: none"> <li>• Arrangements for nonmedical PH trainee (from Feb 2020)</li> <li>• New permanent &amp; locum consultants commenced between December 2019 and February 2020. Development and implementation of 'Retire &amp; Return' policy – 2/3 Consultants</li> <li>• Additional temporary posts offered to retired Public Health Consultants (7 posts)</li> <li>• A number of staff external to PHA have been engaged to support work associated with COVID-19 contact tracing, project delivery etc</li> <li>• 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)</li> <li>• Dedicated HR support has been identified as a point of contact to help take forward recruitment within Public Health Directorate</li> <li>• <b>An internal Public Health HR</b></li> </ul>		recruitment.	<p><b>future pandemics (COVID funding for 2 years; a further BC will be required for permanent funding)- awaiting DoH response (review Dec 2020)</b></p> <ul style="list-style-type: none"> <li>• Ongoing prioritisation of work and reflecting capacity in the development of PHA Annual Business Plan <b>(December 2020)</b></li> <li>• Continue to review and take forward actions agreed with DoH (on-going – <b>review Dec 2020</b>)</li> <li>•</li> </ul>	
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Group meets on a monthly				
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basis to discuss any issues and agree way forward				
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## APPENDIX

### RISKS ADDED TO THE CORPORATE RISK REGISTER AS AT 31 July 2020

Corporate Risk 56		
RISK AREA/CONTEXT: Staffing Compliment in HSCQI Directorate		
<p><b>DESCRIPTION OF RISK:</b> The HSCQI was established in the PHA by the DoH, with temporary funding through transformation monies for the Director and a number of other posts. However recurring funding has not yet been provided for HSCQI. The current staffing compliment in HSCQI Directorate makes it challenging for corporate work to be undertaken, and for HSCQI to deliver on the design intent, which included additional staffing, to build a QI infrastructure for NI HSC services. Establishing HSCQI was a key action stated within Health and Well-Being 2026: Delivering Together.</p> <p>The risk is that the directorate will be unable to fulfil it's core function, service corporate administration needs plus undertake additional requests from the NI HSC system to support improvement work and training.</p>	<p><b>DATE</b>      <b>RISK</b>      <b>ADDED:</b></p> <p>August 2020</p>	

<b>LINK TO ASSURANCE FRAMEWORK:</b> Corporate Control Arrangements Dimension				
<b>LINK TO ANNUAL BUSINESS PLAN 2019/20:</b> Potentially all corporate objectives; particularly corporate objectives 4(working together to ensure high quality services) and 5 (our organisation works effectively).				
<b>GRADING</b>	<b>LIKELIHOOD</b>	<b>IMPACT</b>	<b>RISK GRADE</b>	
	Likely	Major	HIGH	
<b>LEAD OFFICER:</b> Director of HSCQI				
<b>Existing Controls</b>	<b>Internal and External Assurances to the Board</b>	<b>Gaps in Controls and Assurances</b>	<b>Action Plan/Comments/ Timescale</b>	<b>Review Date</b>
<ul style="list-style-type: none"><li>On-going monitoring and prioritising of HSCQI work.</li><li>Ongoing Director review of existing HSCQI Directorate structures.</li><li>Prioritisation of scale and spread activity and all programmes of work.</li><li>Discussions ongoing between Director of HSCQI PHA CEO and DoH quality and safety directorate, and HSCQI Leadership Alliance re workload and capacity</li><li>Temporary transformation</li></ul>	<ul style="list-style-type: none"><li>Ongoing engagement with HSCQI Leadership Alliance and Network</li><li>Reports to AMT</li><li>Link with DOH Quality and Safety Unit</li></ul>	<ul style="list-style-type: none"><li>Staffing levels are insufficient to build a reliable and responsive HSCQI infrastructure for NI HSC services.</li><li>Delays with HR processes resulting in posts that are unfilled with recurrent funding.</li></ul>	<ul style="list-style-type: none"><li>Permanent recruitment process for 8B Senior Regional Improvement Advisor underway following approval at scrutiny. Completion of requisition is imminent (review Dec 2020)</li><li>Band 3 admin post to be filled from waiting list. HR are in the process of offering this post to suitable candidates. Post should be filled by end October/early November 2020 (review Dec 2020).</li><li>Director will pursue with PHA</li></ul>	December 2020



<p>funded posts extended: Band 6 admin extended to 31st March 2021 Data analyst part time post extended to end Dec 2020.</p>			<p>CEO and AMT, the possibility of extending the part time data analyst post beyond the end December 2020 (review Dec 2020).</p> <p>CX to consider potential for slippage from other vacant posts to help provide temporary capacity (review Dec 2020)</p> <ul style="list-style-type: none"> <li>• Ongoing discussions around funding/temporary funding between Director HSCQI, CEO PHA and DOH (review Dec 2020).</li> <li>• Director has requested a meeting with the newly appointed 'Head of the Quality &amp; Safety Unit, DOH' to discuss (review Dec 2020).</li> </ul>	
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Corporate Risk 57

RISK AREA/CONTEXT: PHA Leadership

<b>DESCRIPTION OF RISK:</b> The PHA faces many challenges during 2020/21, continuing to lead the public health response to the COVID 19 pandemic, in an environment where there are still many uncertainties and unknowns about how the virus will develop over the coming months, at the same time as seeking to re-start and prioritise other PHA business, reflecting and responding where appropriate to the impact of COVID 19.				<b>DATE RISK ADDED:</b> August 2020
At the same time the PHA has a new management team, with the interim Chief Executive and two Directors taking up post in the last quarter of 2019/20. In addition one Director retires early autumn 2020, and a second at the end of December 2020. Additionally the HSCB Director of Finance and AD Finance, who lead the provision of finance input/advice to the PHA, will be vacant from October and August respectively.				
At the same time there is a vacant Non-Executive post. While there are many opportunities with a fresh senior team in place, the scale of change has also the potential to lead to instability, with a loss of corporate memory and resources required to gain organizational knowledge and build teams.				
<b>LINK TO ASSURANCE FRAMEWORK:</b> Corporate Control Arrangements Dimension				
<b>LINK TO ANNUAL BUSINESS PLAN 2019/20:</b> Potentially all corporate objectives; particularly corporate objectives 4( working together to ensure high quality services) and 5 (our organisation works effectively).				
<b>GRADING</b>	<b>LIKELIHOOD</b>	<b>IMPACT</b>	<b>RISK GRADE</b>	
	Likely	Major	High	
<b>LEAD OFFICER:</b> Chief Executive and Chair				
<b>Existing Controls</b>	<b>Internal and External Assurances to the Board</b>	<b>Gaps in Controls and Assurances</b>	<b>Action Plan/Comments/ Timescale</b>	<b>Review Date</b>

<ul style="list-style-type: none"> <li>Regular AMT meetings;</li> <li>Experience of new Directors;</li> <li>Established processes and continuing knowledge of staff under Director level;</li> <li>Interim CX contract confirmed to August 2021;</li> <li>Chair re-appointment confirmed to May 2021</li> </ul>	<ul style="list-style-type: none"> <li>Regular Board meetings, with reports and updates to Board members;</li> <li>Regular Sponsorship Review meetings with CMO in DoH;</li> <li>Established corporate governance processes – Risk Register, Assurance Framework etc.</li> </ul>	<ul style="list-style-type: none"> <li>Loss of corporate knowledge and experience across a number of areas.</li> </ul>	<ul style="list-style-type: none"> <li>ADs (Operations) will report to and meet regularly with CX;</li> <li>CX to review the role of DOps over next months in light of other changes in PHA and review of HSC structures, while seeking Interim Director cover via an expression of interest (December 2020);</li> <li>Process in place to offer DPH</li> </ul>	December 2020
			<ul style="list-style-type: none"> <li>post via waiting list (Nov 2020);</li> <li>AD Finance recruited to take up post November 2020</li> <li>DoH to initiate recruitment process for permanent CX (Spring 2021)</li> </ul>	

Corporate Risk 58				
RISK AREA/CONTEXT: Staff Resilience				
<p>DESCRIPTION OF RISK: The PHA was required to move to a 7 day working pattern in the initial phase of the COVID 19 pandemic. The organization is again entering a period of 7 day working, which is likely to be required through to the end of the winter. PHA has limited staff capacity, and while additional staff have been brought in, there is concern that a significant number of staff will have to work more than 5 days a week over a long and sustained period.</p> <p>As staff are already tired from the first phase, and with many unable to take a proper break during July and August due to the continuing work pressures, along with the increasing workload, there is a risk that staff may become ill and/or no longer able to continue.</p>				DATE RISK ADDED: October 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	
	Possible	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"> <li>• Regular AMT meetings;</li> <li>• Business Continuity SITREP reporting initiated October 2020;</li> <li>• Staff monitoring information collected and reported to HR</li> </ul>	<ul style="list-style-type: none"> <li>• Regular Board meetings, with reports and updates to Board members;</li> <li>• Established corporate governance processes – Risk Register, Assurance Framework etc.</li> </ul>	<ul style="list-style-type: none"> <li>• Potential loss of staff with knowledge and skills to be able to deliver COVID response;</li> <li>• Potential insufficient staff to fulfil business continuity.</li> </ul>	<ul style="list-style-type: none"> <li>• Redeployment of staff internally within PHA to provide cover to critical functions (review December 2020);</li> <li>• Seek additional staff to support via HSC Leadership Centre (November 2020);</li> <li>• Seek redeployment of staff from HSCB/BSO (review December 2020);</li> <li>• Review of work that can be stood down to allow concentration of resources on COVID response and other</li> </ul>	December 2020
			critical areas (review December 2020) <ul style="list-style-type: none"> <li>• Working with BSO HR regarding mechanisms to support staff and build resilience (review December 2020).</li> </ul>	



## **APPENDIX**

# **RISKS REMOVED FROM CORPORATE RISK REGISTER AS AT 31 August 2020**

**- NIL -**