

**HS Paper 01/20**

**Board Meeting: 14 February 2020**

**Corporate risk CRR 19-6 update**

**Recommendation / action required:**

The Board is requested to consider the update on risk 19-6 on the Corporate Risk Register (CRR) and to confirm whether the actions described here provide sufficient assurance that appropriate action is being taken to mitigate the risks to the organisation of reputational damage to our mission during this transition period

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**Sponsoring Director:** Cath Denholm, Director of Strategy

## Corporate Risk CRR 19-6 Update

### Purpose

1. The Board is requested to **consider** the risk report 19-6 on the Corporate Risk Register (CRR) in Appendix 1 and to **confirm** whether the actions described here provide sufficient assurance that appropriate action is being taken to mitigate the risks to the organisation of reputational damage to our mission during this transition period

**Risk 19-6:** As a result of not retaining influence with and support from important stakeholders in the transition year, there is a risk that our key messages and core agenda are not carried over as powerfully into Public Health Scotland, reducing its credibility and impact in reducing health inequalities.

### Background

2. Health Scotland continues to engage staff and stakeholders through partnership working, events and communications activities as we deliver the five Strategic Priority areas in our Fairer Healthier Scotland Delivery Plan 2017-22. Carrying over our 15 years of public health leadership and learning to Public Health Scotland will help ensure continued impact on reducing health inequalities.

The following set of outcomes steer our effective planning for influence and engagement over the transition period:

- The focus and momentum of our core business to improve health and reduce inequalities remains a focus of work and our communications over the period.

- Key stakeholders continue to recognise Health Scotland for our focus on health inequalities and the right to health and expect to see this focus carried on into Public Health Scotland.
- Staff and stakeholders are enabled to mark and celebrate the ending of NHS Health Scotland with ‘tangible’ products and events, which both celebrate impact and signal future work.

### **Finance and Resource Implications**

3. The specific activities associated with transition are costed within our final 2019/20 Delivery Plan.

### **Staff Partnership**

4. There are no staff partnership issues arising from this paper.

### **Communication and Engagement**

5. The CRR is published on the NHS Health Scotland Website, and updates to the CRR included as part of the Quarterly Corporate Performance Reports will also be published on the website. This paper will also be included in the suite of Board papers published on the NHS Health Scotland website.

### **Corporate Risk**

6. This paper is specifically designed to consider Corporate Risk CRR 19-6, as described above. It also brings more focus to the strategic programmes of work for which we want to achieve and maintain a particularly high level of visibility with external stakeholders, which is critical to maintaining the credibility and sense of continuity with stakeholders over this transition period.

### **Issues Associated with Transition**

7. CRR risk 19-6 is focussed on the transition to the new public health body.

### **Promoting Fairness**

8. No promoting fairness issues have been identified.

### **Sustainability and Environmental Management**

9. No sustainability or environmental management issues have been identified.

### **Action / Recommendations**

10. The Board is requested to **consider** the risk report 19-6 on the Corporate Risk Register (CRR) in Appendix 1 and to **confirm** whether the actions described here provide sufficient assurance that appropriate action is being taken to mitigate the risks to the organisation of reputational damage to our mission during this transition period

**Claire Dea**

**Organisational Lead for Communications**

**14 February 2020**

## **Appendix 1: CRR 19-6 Update**

### **Risk 19-6**

#### **Description**

As a result of not retaining influence with and support from important stakeholders in the transition year, there is a risk that our key messages and core agenda are not carried over as powerfully into Public Health Scotland, reducing its credibility and impact in reducing health inequalities.

**Risk Category and Appetite:** Business, Open

**Governance Committee:** Board

**Risk Owner:** Director or Strategy

**Response Co-ordinator:** Organisational Lead for Communications

**Gross Score:** 12 (Impact 4; Likelihood 3)

#### **Controls in Place**

- Transition & Influence Plan: Building Our Future - which sets out our priorities for engaging with staff and stakeholders over the next nine months in order that:
  - The impact of Health Scotland's work in advancing efforts to improve health and tackle inequalities in health in Scotland is understood
  - The key priorities and principles of that work are therefore transitioned effectively into Public Health Scotland, through our own efforts and with the targeted support of key stakeholders.

- Embedding key messages on transition/Public Health Scotland into stakeholder communication (e.g. Notes to Editors in press release, business-as-usual communications and strategic social media content).

### **Actions Taken in Last Quarter**

- High profile national print and broadcast media coverage on Flu and Minimum Unit Pricing. Local media coverage on the cost of the school day.
- Publication of corporate blogs on:
  - international public health issues
  - our newly developed health and social care inequality indicators
  - the importance of viewing health data from difference perspectives.
- Trade publication coverage on child poverty in Holyrood Magazine (print & digital).
- Delivery of plenary and parallel sessions at the FPH Conference: 'Social justice in Public Health' (topics covered included: MUP, premature mortality, child poverty, link worker project, drugs, and immunisation).
- Worked in collaboration with ALLIANCE Scotland to publish a blog from Cath Denholm reflecting on 17 years of NHSHS and on the importance of collaboration in past, present and future public health challenges.
- Positioning statements/comments were published on:
  - Menu for Change (food parcel demand)
  - Vaccinations
  - Life Expectancy
- Support to International Human Rights Day using the corporate and Children Young People & Families social media accounts to frame action to prevent and mitigate ACEs as a human rights issue.

## **Actions taken specific to our transition to Public Health Scotland**

- Communications Launch Plan on how we will promote, position and protect the new body approved by the PHS Delivery Group. Launch activity to include: press coverage, social media messaging, stakeholder engagement meetings, trade/magazine coverage, internal communications, political engagement and specific event attendance for the new PHS Chief Executive and Senior Management Team. NHS Health Scotland work/legacy embedded within all pro-active launch plans and messaging – specifically in relation to public health priorities.
- Recommendations on new operational plans in progress – with a focus on media handling, FOI management and out-of-hours/incident management processes (including crisis communications).

## **Measures**

- Our reputation and profile as the lead agency for tackling inequalities in health is maintained and understood.
- Health Inequalities are embedded at the heart of Public Health Scotland.
- Stakeholders are informed and engaged in our transition process.

**Net Score:** 8 (Impact 4; Likelihood 2)

**\*The Risk Assessment Matrix can be found in Appendix 2.**

## Appendix 2 – Risk Appetite Matrix

	<b>Likelihood: 1 Rare</b>	<b>Likelihood: 2 Unlikely</b>	<b>Likelihood: 3 Possible</b>	<b>Likelihood: 4 Likely</b>	<b>Likelihood: 5 Almost certain</b>
<b>Impact: 1. Negligible</b>	1 Very Low	2 Very Low	3 Low	4 Low	5 Medium
<b>Impact: 2. Minor</b>	2 Very Low	4 Low	6 Medium	8 Medium	10 Medium
<b>Impact: 3. Moderate</b>	3 Low	6 Medium	9 Medium	12 High	15 High
<b>Impact: 4. Major</b>	4 Low	8 Medium	12 High	16 High	20 Very High
<b>Impact: 5. Extreme</b>	5 Medium	10 Medium	15 High	20 Very High	25 Very High

### Risk Appetite Matrix

<b>Net Risk Assessment</b>	<b>Risk Appetite</b>	<b>Risk Appetite Response</b>
20-25 – Very High	Hungry	Eager to be innovative and to choose options offering potentially higher rewards despite greater inherent risk.
12-16 – High	Open	Willing to consider all options and choose the one that is most likely to result in success, while also providing an acceptable level of reward
5 -10 – Medium	Cautious	Preference for safe delivery options that have a low degree of inherent risk and may only have limited potential for reward
3 - 4 – Low	Minimalist	Preference for ultra-safe business delivery options that have a low degree of inherent risk and only have potential for limited reward
1-2 – Very Low	Averse	Avoidance of risk and uncertainty is a key organisational objective



