

Corporate Risk Control Register

| Risk Category | Activity | Top Risk(s) | Initial Likelihood | Initial Severity | Initial Risk Rating | Prevention Controls - reducing likelihood | Mitigation Controls - reducing severity | Final Likelihood | Final Severity | Final Risk Rating | Responsibility? | Last / next review |
|---------------|--|--|--------------------|------------------|---------------------|---|--|------------------|----------------|-------------------|-----------------|--------------------|
| | | | | | | | | | | | | |
| 1 | Cyber attack | <ul style="list-style-type: none"> • Virus, ransom-ware or other malware attack or software vulnerability. • Malicious software can damage IT system, steal or encrypt data or prevent normal service by sheer volume of extra traffic. • Problem could spread to many servers, computers and/or other devices and take days/weeks to correct. • Denial of Service Attacks could affect internal or external systems. • Reputational damage can result from cyber attack. | 4 | 5 | 20 | <ul style="list-style-type: none"> • Anti-virus & anti-malware software is used on all servers & computers. These are updated automatically in real-time. • Software updates & security patches are applied automatically from O365 tenant ring group. • Firewalls control unauthorised entry from Internet. Web filtering software prevents users from accessing unsafe websites. Email filtering blocks most unsafe emails. • Staff are educated to avoid risks from phishing attacks. Simulated attacks are used to ensure that staff comply. Mandatory training now includes cyber security for all staff. • Enforced use of strong passwords and MFA. | <ul style="list-style-type: none"> • Multiple backups of data are maintained on a daily/monthly basis. • Wasabi & HYCU cloud backup solution of data are maintained on a daily/monthly basis. • Backups are both on-line and off-line to maximise opportunity for data recovery. • Data has now been migrated to Microsoft and other hosted platforms. • Cyber Insurance acquired to provide cover for additional work in recovery and restoration | 3 | 4 | 12 | Exec | Oct 25 / Jan 26 |
| 2 | Impact of Inflation | <ul style="list-style-type: none"> • Costs rise at faster rate than income • Funding gap grows | 4 | 5 | 20 | <ul style="list-style-type: none"> • Efficiency measures being considered to share and reduce overall costs | <ul style="list-style-type: none"> • Further review of cost and affordability of service would need to be initiated to seek mitigation savings • Inflation cost growth is main thrust of lobbying to Govt and NHS | 3 | 4 | 12 | Exec | Oct 25 / Jan 26 |
| 3 | Key staff capacity | <ul style="list-style-type: none"> • Progress in critical projects is hindered • Staff burnout leads to staff losses • Work/life balance and job satisfaction impaired • Negative impact on service delivery | 4 | 4 | 16 | <ul style="list-style-type: none"> • Reduce some activities, meetings, reporting in order to release time pressure • Set realistic expectations and plan to resource needs and respond accordingly to avoid a crash • Provide flexibility in working arrangements to enable space to recharge where possible | <ul style="list-style-type: none"> • Look to reduce scale of operation over time in order to operate within the bounds of possibility • Seek to ensure critical knowledge is shared and documented • Consider alternative source of expertise | 3 | 4 | 12 | Exec | Oct 25 / Jan 26 |
| 4 | Inability to recruit sufficient volunteers to support income generation | <ul style="list-style-type: none"> • Retail operation is restricted • Lottery plans curtailed • Fundraising plans curtailed | 4 | 4 | 16 | <ul style="list-style-type: none"> • Volunteer management being brought together under People Services • Marketing budget assigned to volunteer recruitment - continue to campaign for recruits • Applicant tracking system in progress | <ul style="list-style-type: none"> • Create a backup volunteer force who have ability to step in | 3 | 3 | 9 | Exec | Oct 25 / Jan 26 |
| 5 | Inability to locate suitable new retail venues | <ul style="list-style-type: none"> • Future financial targets not met • Core costs not spread widely enough | 4 | 4 | 16 | <ul style="list-style-type: none"> • Qualified volunteer working on project with Director • Continue to scan for ideal sites and/or pop-up shops | <ul style="list-style-type: none"> • Ensure that current outlets are as efficient and cost effective as possible • Maximise ad hoc and other opportunities to generate income (including lottery sales) | 3 | 3 | 9 | Exec | Oct 25 / Jan 26 |
| 6 | Materially reduced legacy income | <ul style="list-style-type: none"> • Financial Losses continue and cash drains • Long Term sustainability reduced | 4 | 4 | 16 | <ul style="list-style-type: none"> • Legacy & In Mem plan being implemented • Part of Hospice UK national advertising campaign • Regular promotion and publications of Legacies | <ul style="list-style-type: none"> • Maintain sufficient cash resource to manage volatility of legacy drought - mitigation funding agreed in principle | 3 | 3 | 9 | Exec | Oct 25 / Jan 26 |
| 7 | Cash flow difficulties | <ul style="list-style-type: none"> • Significant legacy debtor delays becoming cash • Legacies do not arise, constraining cash • Investment value collapses | 4 | 4 | 16 | <ul style="list-style-type: none"> • Regular contact with legacy solicitors • Investments are liquid and can be rapidly returned to cash | <ul style="list-style-type: none"> • Potential for short term bank finance - currently not in place • Mitigation funding might be activated alongside a recovery/reduction plan | 3 | 3 | 9 | Exec | Oct 25 / Jan 26 |
| 8 | Income Generation does not increase along planned growth trajectory | <ul style="list-style-type: none"> • Long term financial sustainability at risk • Financial Losses continue and cash drains | 3 | 5 | 15 | <ul style="list-style-type: none"> • Fundraising strategy in place - strong fundraising, supporter-care and comms teams in place with FR focus • Nurture and relationship with lottery players upgraded, in-house lottery team being recruited, multi-team approach • Retail focus on cost control, pricing and Gift Aid + looking for suitable sites | <ul style="list-style-type: none"> • Cash Balance in place to support plan implementation over next 18 months • Additional mitigation funding potentially available to ensure ability to manage volatility | 3 | 4 | 12 | Exec | Oct 25 / Jan 26 |
| 9 | Loss of Key Personnel | <ul style="list-style-type: none"> • Some systems may be understood by only one person, who could leave etc. Some systems could then be difficult to maintain, with extended downtime, or projects could be delayed. | 3 | 5 | 15 | <ul style="list-style-type: none"> • Seek to provide internal back-up and succession to help spread the critical systems knowledge • Aim to provide suitable remuneration and conditions of service in order to retain | <ul style="list-style-type: none"> • Create effective handover documentation that could be followed by others • Succession Planning | 3 | 4 | 12 | Exec | Oct 25 / Jan 26 |
| 10 | Reduced clinical workforce | <ul style="list-style-type: none"> • Reduced responsiveness to existing caseloads • Management of expectations • Lower staff morale • Reduced staff retention • Reputational damage • Reduced referrals | 5 | 3 | 15 | <ul style="list-style-type: none"> • Clear messaging to internal and external stakeholders • Review of operational guidelines following a period of existing guidelines and reduced staffing model. • Regular staff meetings / open door policy | <ul style="list-style-type: none"> • Manage staffing levels across a 7 day service • Collaborative working with external colleagues to promote efficiency and reduce risk of patient outliers • Prioritise the support that we are responsible for delivering and reduce the amount that we pick up due to a lack of provision within the community. | 5 | 2 | 10 | Exec | Oct 25 / Jan 26 |
| 11 | IT systems failure / Cloud Access Down | <ul style="list-style-type: none"> • Switch / Router failure or configuration corruption / deletion • Firewall failure or configuration corruption / deletion • Major hardware failure can be caused by a range of events, both accidental and malicious. Depending on which hardware fails, vital services could be disrupted or communications lost. • Inability to access contemporaneous clinical records or run business continuity reports | 3 | 5 | 15 | <ul style="list-style-type: none"> • Firmware and software updated regularly. • For Servers and NAS, dual components provide redundancy for single item failures. • Global spare SAN disks enable automatic replacement of a failed drive. • Firmware and software updated regularly. • Use of strong passwords. • Access limited to essential personnel. • IT System Management Controls | <ul style="list-style-type: none"> • Spanning tree protects against single device failure. • High availability firewalls allow one firewall to take over if another fails. • Spare switch ready configured for replacement • Backup copies of all configs kept securely. • Warranty support contracts provide rapid response to replace failed parts. • Regular backups of virtual servers enable rapid recovery in event of failure. • Cloud firewalls are updated automatically and can failover to a second Zen internet connection if needed. • Contactable team OOH (not formal contract) • Back up resource -outsourced at times of AL • Daily back up to PAS system facilitating access to the PAS • Hard copy daily print outs to provide basic continuity | 2 | 4 | 8 | Exec | Oct 25 / Jan 26 |
| 12 | SRH is subject to reputational damage arising from matters relating to cultural and legislative environment, finance cost reductions and medical practice | <ul style="list-style-type: none"> • Supporters are dissuaded from donating, volunteering etc • Staff disengagement • Sector colleagues change behaviour towards us | 3 | 4 | 12 | <ul style="list-style-type: none"> • PR approach to managing relevant matters is prepared • Continued collaborative work with external sector bodies • Open reporting and learning culture in clinical environment to ensure improvement is continuous and care qualities are maintained | <ul style="list-style-type: none"> • Positive and explanatory aspects of any news is prepared • 2-way dialogue with staff | 3 | 3 | 9 | Exec | Oct 25 / Jan 26 |

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| Over 13 = red |
| 8-13 = amber |
| 7 or under = green |

The axis for Likelihood should be from 1. Very Low – 2. Low – 3. Medium – 4. High – 5. Very High
 The axis for Severity should be from 1. Light – 2. Serious – 3. Major – 4. Catastrophic – 5. Multi Catastrophic