

Location*

NHSL

NHS LANARKSHIRE RISK REGISTER



Risk Category**

Corporate Governance

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September 2005

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March 2006

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Risk Ref	Description of Risk	Risk Exposure		Risk Exposure Rating Col 3 x Col 4	Assessed Risk Low Moderate High	Control Measures	Control Score	RISK RATING		Risk Owner	Risk Ranking
		Like-lihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		
C01	There is a risk that NHSL does not have clearly articulated corporate objectives and a robust performance management system to ensure implementation.	2	5	10	M	Setting of Corporate Objectives on an annual basis, which reflect the delivery of national and local priorities; Production of Health Plan, reflecting national and local priorities; Setting of individual Director objectives within the overall context of the Corporate Objectives and Health Plan delivery; Sign-off of Corporate and individual Director objectives by Chairman, Chief Executive and by Remuneration Sub-Committee of the Staff Governance Committee; Delivery of Corporate and Health Plan objectives monitored through the Performance Management system; Monitoring of progress in delivery of individual Director objectives through the performance appraisal system;	3	30		CE	2

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		Like-lihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		

C01	There is a risk that NHSL does not have clearly articulated corporate objectives and a robust performance management system to ensure implementation. (cont.)					Fortnightly meetings of Corporate Management Team, with added input of : Employee Director; Head of Communications; Chair of Area Clinical Forum; Board Secretary, to maintain a focus on the delivery of objectives and emerging strategy; Corporate Financial Recovery Plan Core Group, with underpinning Executive Support Team, to maintain oversight in the delivery of the Corporate Financial Recovery Plan projects and external validation by Consultants; Business meetings of NHS Board, which routinely receives progress reports on the principal strands of governance, and on the delivery of national and local priorities; Performance Review Committee and Operating Management Committee, as Committees of the					
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		Like-lihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		

C01	There is a risk that NHSL does not have clearly articulated corporate objectives and a robust performance management system to ensure implementation. (cont.)					NHS Board, meeting regularly, and considering detailed progress reports in relation to: finance; waiting times; delayed discharges; and other key issues of corporate performance and operational delivery; Revised Governance arrangements, including linkages across Community Health Partnerships and the Acute Division, with Operating Committees functioning as Committees of the NHS Board and having Non Executive and Executive Director involvement. Existence of Board Approved Schemes of Delegation for : financial governance; health and clinical governance and staff governance; Agreed statement of organisational values, informed by consultation with the public and with staff, which inform strategy development;					
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		Like-likelihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		
C01	There is a risk that NHSL does not have clearly articulated corporate objectives and a robust performance management system to ensure implementation. (cont.)					Designated Executive Director lead responsibility for key functions, in addition to their professional lead responsibilities; Existence of agreed risk philosophy, with oversight of risk management by an Executive level Risk Management Steering Group, reporting to the Corporate Management Team and to the Financial Governance Committee; Robust external and internal audit arrangements.					
C02	There is a risk that NHSL fails to engage appropriately with internal and external stakeholders in the pursuit of its objectives.	2	4	8	L	Development of strategies and health plan which take account of national guidance and assessment of local needs and priorities; Informed by Community Planning arrangements in place with the local authorities, including the Health and Care Partnerships, Joint Future arrangements, and the Joint	2	16		CE	3

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		Like-lihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		

C02	There is a risk that NHSL fails to engage appropriately with internal and external stakeholders in the pursuit of its objectives. (cont.)					<p>Health Improvement Plans; Strategy development through a Strategy Group, led by the Modernisation Director, linking with a wider strategy forum, and reporting to the Strategic Development and Redesign Committee, as a committee of the NHS Board, and ultimately to the NHS Board itself; Equality Diversity and Spirituality Committee, as a Committee of the NHS Board, with oversight of delivery of Fair 4 All Strategy and the Spirituality Policy. Regular briefing and engagement with constituency and list MSPs; On-going engagement with interests within overall context of PFPI, including a designated lead for PFPI;</p> <p>Linkages with the Health Council, with which the approach to PFPI was developed in concert;</p>					
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CO2	There is a risk that NHSL fails to engage appropriately with internal and external stakeholders in the pursuit of its objectives. (cont.)					Picture of Health initiative, launched in late 2004 and continuing through 2005; Information about PoH initiative issued to all NHSL residents; Analyses of questionnaire responses to A Picture of Health used to shape the development of organisational values, and to inform the development of and consultation on the further phases of PoH; Emergence of Public Partnership Fora within Community Health Partnerships; A locality sub-structure within Community Health Partnerships, which mirrors social work locality teams; Director of Communications has full access and involvement in NHS Board and its Committees and the Corporate Management Team; The existence of a Steering Group to drive PoH;					
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C02	There is a risk that NHSL fails to engage appropriately with internal and external stakeholders in the pursuit of its objectives. (cont.)					Area Clinical Forum and Professional Advisory Committees – regularly engaged in the consideration of key strategic/corporate issues; Area Partnership Forum, through which staff-side is regularly engaged in dialogue about key strategic/corporate issues; Regional Planning arrangements, including West of Scotland Regional Planning Group – reported routinely to NHS Board; Revised Governance arrangements, including linkages across Community Health Partnerships and the Acute Division, with Operating Committees functioning as committees of the NHS Board and having Non-Executive and Executive Director involvement.					

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		Like-lihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		

C03	There is a risk that NHSL does not comply fully with statutory requirements and obligations.	3	5	15	H	All as per C01 and C02, plus : Health and Safety at Work etc Act; - oversight of compliance through Staff Governance Committee and Salus – the Lanarkshire Occupational Health and Safety Service, full participation in Scotland's Health at Work (SHAW). Freedom of Information Act; - designated Executive Lead for FOI; FOI Policy is widely publicised; designated FOI Officer, linking with key Senior Officers across the system, and with key partner agencies. Data Protection Act;-Data Protection Policy; designated Data Protection Officer; wide distribution of Data Protection Act compliance information; monitoring through Caldicott arrangements, including	3	45		CE	1
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		Like-lihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		

C03	There is a risk that NHSL does not comply fully with statutory requirements and obligations. (cont.)					information produced nationally by Health Rights Information Scotland. Access to Health Records Act; - Access to Health Records; policy designated Health Records Officer; wide distribution of Access to Health Records Act compliance information; monitoring through Caldicott arrangements, including information produced nationally by Health Rights Information Scotland. Caldicott Guardian responsibility vested in Director of Public Health; Disability Discrimination Act; - Board level, Equality, Diversity and Spirituality Committee; Disability Audits; and additional investment to achieve compliance. Executive lead for litigation; Designated leads at corporate and divisional level, with responsibility for oversight of key					
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		Like-lihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		

C03	There is a risk that NHSL does not comply fully with statutory requirements and obligations. (cont.)					responsibilities, over and above the services for which they are functional executive head; Linkages with Central Legal Office; The CNORIS statutory insurance scheme arrangements, within the overall context of NHS Quality Improvement Scotland, clinical governance and risk management standards which promote improved robustness of the Board's Risk Management arrangements. Standing Orders and Committee Administrative Arrangements, including Schemes of Delegation for Finance; Staff; and Health and Clinical Governance, with Schedule of Decisions Reserved for the NHS Board. Standing Financial Instructions; Fraud Policy; Publication of Annual Report and					
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		Like-lihood (L)***	Severity (S)****					ACTUAL Col 5 x Col 8	TARGET Col 5 x Target Control Score		
C03	There is a risk that NHSL does not comply fully with statutory requirements and obligations. (cont.)					Accounts; Publication of Director of Public Health Annual Report on the State of Public Health within NHS Lanarkshire. Statement on Internal Controls as part of Annual Accounts process. Robust Internal and External Audit arrangements.					

* Location = Corporate Directorate, Division, LHCC, Hospital, Directorate or Department

** Risk Category = Clinical, Corporate, Finance, HR, Operational

*** (L) = 1-Rare, 2-Unlikely, 3-Possible, 4-Likely, 5-Almost Certain

**** (S) = 1-Insignificant, 2-Minor, 3-Moderate, 4-Major, 5-Catastrophic