

NHS Lanarkshire  
30<sup>th</sup> January 2019

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**SUBJECT: NHSL CORPORATE RISK REGISTER**

**1. PURPOSE**

This paper is coming to the Board:

For assurance	<input checked="" type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input checked="" type="checkbox"/>
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**2. ROUTE TO BOARD**

This paper has been:

Prepared	<input checked="" type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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By the Corporate Risk Manager, on behalf of the Corporate Management Team

**3. SUMMARY OF KEY ISSUES**

The Corporate Risk Register was previously presented to NHSL Board in November 2018. Since then, the Corporate Management Team have considered the corporate risk register in December 2018 and January 2019. The Corporate Management Team consider emerging and new risks; focus on very high graded risks across NHSL and risks exceeding the corporate risk appetite. As a result, risk descriptions, assessed level of risk, and /or controls have been updated accordingly to reflect progress of mitigating actions and impact.

This report will:

- i. Provide a summary of material changes to the Corporate Risk Register, including new and closed risks, since the last reporting period
- ii. Set –out the NHS Lanarkshire Corporate Risk Profile over time; with the number of risks plotted by likelihood x impact; related corporate objectives and type, accurate as at 17<sup>th</sup> January 2019
- iii. Set-out very high graded corporate risks that are above the corporate risk appetite, including very high graded risks across NHSL as enablers for corporate consideration and decision-making
- iv. Set-out for consideration, any emerging very high graded risks through business critical projects
- v. Facilitate reference to the 33 risks set out in the NHSL Corporate Risk Register, accurate as at 17<sup>th</sup> January 2019 and sorted in descending order by the assessed level of risk (current) from very high to low (Appendix 1)

i) **Summary of Material Changes to the Corporate Risk Register Since the Last Reporting Period**

For this reporting period there is a total of 33 risks, with the summary of material changes within this reporting period as below:

Summary of the Material Changes within the NHSL Corporate Risk Register

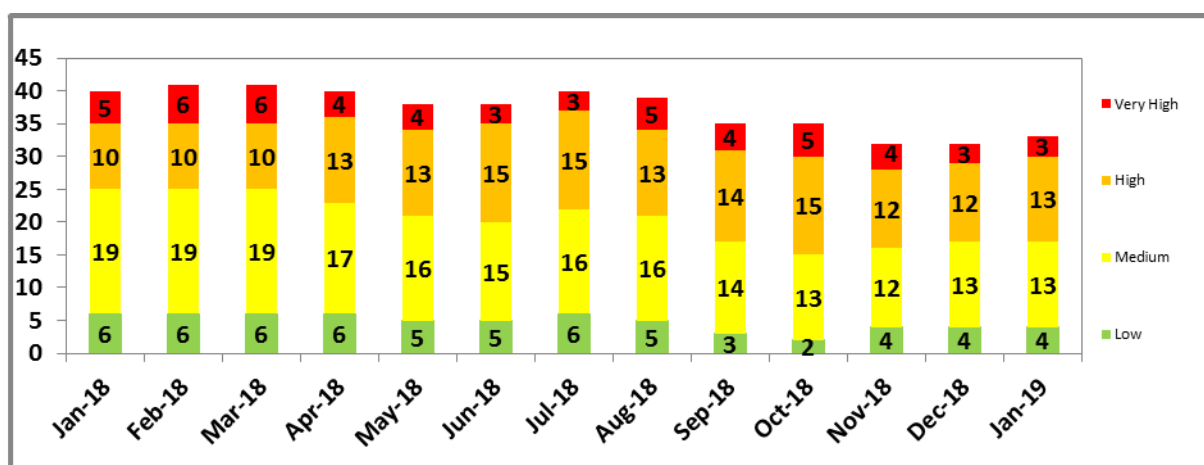
<b>Closed Risks</b>		
<b>Risks Closed in December 2018:</b> There was no risks closed at the December reporting period.		
<b>Risk Closed in January 2019:</b> One risk : ID 1491 - Community Bed Reprovision to Align with Balance of Care Need has been transferred / de-escalated from Corporate Risk to Operational / Delivery Risk Register for North H&SCP.		
<b>New Corporate Risks Identified</b>		
<b>New Risk in December 2018:</b> No new risks identified for this reporting period.		
<b>New Risks in January 2019:</b> One (1) new risk has been recorded :		
Risk ID 1724 : There is a risk of adverse publicity for NHSL as the strategic intention progresses for Monklands Hospital, resulting in potential delays in the Boards delivery of 'Achieving Excellence'.		
This risk has been assessed as <b>High</b> and is owned by Mr C Campbell. ---		
One emerging risk regarding the current sustainability of the Four Seasons Healthcare Group is being set out for approval.		
<b>Material Changes of Note for Specific Risks Since the Last Reporting Period</b>		
Risk ID	Description of the Risk and Note of Change Within the Review Period	Risk Owner
1702	There is a risk that NHSL will not be fully compliant with regulations / legislation regarding clinical waste management resulting from the failure of the NSS contracted requirements. This has the potential to create site health & safety, infection control and other environmental hazards to staff and the public, adversely impacting on the reputation of NHSL.  <u>Note of Change</u> Risk reviewed noting the NSS contracted company is no longer operating and all business continuity plans are in place.	C Lauder
1587	There is a risk that the 2 site model of delivery of an Out of Hours (OOH) service cannot be sustained resulting from national and local disengagement of salaried and sessional GMP's, resulting in the potential to adversely impact on patient care, partner services including A&E, the national performance targets and the reputation of the partner agencies.  <u>Note of Change</u> At review, this risk has been reduced from High to Medium with continuous oversight over the winter period. New controls to include the	V De Souza, Director of South H&SCP

	testing of a combined GP/A&E Consultant Tele Triage, and the risk owner has moved from C Campbell to V De Souza in the role of Director of South H&SCP.	
1450	<p>There is an increasing risk that there is insufficient GP capacity to enable sustainable delivery of general medical practice across NHSL, resulting from a range of changes including a change in portfolio career arrangements, age profile of the existing workforce, increased part time working and less medical students choosing GP practice as a career. For NHSL, this has already resulted in a number of practices 'closing their list' which has consequences for other neighbouring practices, with some practices alerting NHSL to say they believe their ongoing sustainability as a practice is in serious doubt.</p> <p>Many of the staff who may be identified as potentially offering support to cover GP vacancies are also in short supply, e.g. Advanced Nurse Practitioners. Additionally, there is the potential for rising financial costs for practices as a result of the proposed changes to the NHS Pension Scheme.</p> <p><u>Note of Change for December 2018</u> Mitigating controls reviewed with new controls: Procurement of a community information system to optimise contribution to community services.</p> <p><u>Note of Change for January 2019</u> Description changed to include the proposed changes to the NHS pension scheme that may result in employer (GP Practices) contributions rising by around 5%, that is likely to exacerbate this risk.</p>	C Campbell
1412	<p>There is a risk to NHSL that there is insufficient GP capacity to enable sustainable delivery of medical input to the community hospitals that are dependent on the GP's. Issues include a change in portfolio career arrangements, age profile of existing workforce, increased part time working and less medical students choosing GP practice as a career. For NHSL, this has already resulted in one community hospital being closed to admissions, with the potential to recur in other areas.</p> <p><u>Note of Change</u> Approval has been sought and granted through IJB to re-designate Lockhart Hospital from an inpatient facility to a Community Health and Care Facility. In light of this the risk has been reduced from High to Medium with final changes to be made through ISD. The risk remains live in the event this could apply to other community hospitals. Mitigating controls reviewed and updated.</p>	V De Souza, Director of South H&SCP
1661	<p>There is a risk that NHSL will not be in full operational readiness for EU withdrawal, especially in areas where there is limited detail regarding change and impact over the workforce and a range of broader product, access and legislation issues with the potential to adversely disrupt continuity of delivery of healthcare services across NHSL.</p> <p><u>Note of Review for December 2018</u> Risk reviewed noting the postponement of the Westminster vote due for 11th December. Awaiting further direction and details from the Scottish Government to enable a fuller risk analysis of the position for NHS Boards.</p>	C Campbell

	<p><u>Note of Change for January 2019</u>  Risk reviewed on 15th January 2019, noting the extreme political uncertainty, including the expected result of the parliamentary vote on the evening of 15th January and the impact of rejection of the current Brexit plan. Mitigating controls reviewed regarding the actions that can be taken, including resilience testing. Further review scheduled for CMT Monday 21st January. Remains a <b>Very High</b> risk</p>	
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ii) **NHSL Corporate Risk Register Profile as at 17<sup>th</sup> January 2019**

The corporate risk profile is shown for the period January 2018 to 17<sup>th</sup> January 2019 below:



Risk Heat map

From the 33 live corporate risks, the profile, plotted by likelihood x impact = assessed level of risk, is shown in the heatmap below:

			IMPACT				
			Negligible	Minor	Moderate	Major	Extreme
		Score	1	2	3	4	5
LIKELIHOOD	Almost Certain	5			1	1	
	Likely	4			4	2	
	Possible	3		2	5	8	
	Unlikely	2		1	2	4	
	Rare	1		1	2		

## Corporate Objectives

All corporate risks are aligned to the 3 primary corporate objectives agreed as Effective, Person Centred and Safe:

	Low	Medium	High	Very High	Totals
Effective	4	6	5	1	16
Person - Centred	0	0	0	0	0
Safe	0	7	8	2	17
Totals	4	13	13	3	33

## Risk Types

The 33 risks have been further described and set out as risk types below:

	Low	Medium	High	Very High	Totals
Business	3	11	8	3	25
Clinical	1	2	2	0	5
Reputation	0	0	3	0	3
Staff	0	0	0	0	0
Totals	4	13	13	3	33

### iii) Defining and Measuring Risk Appetite and Risk Tolerance with Very High Graded Risks Across NHSL, and Mitigating Controls

NHS Lanarkshire has agreed the boundary corporate risk appetite and tolerance below:

			IMPACT				
			Low	Minor	Moderate	Major	Extreme
Score			1	2	3	4	5
LIKELIHOOD	Almost Certain	5			1	1	
	Likely	4			4	2	
	Possible	3		2	5	8	
	Unlikely	2		1	2	4	
	Rare	1		1	2		

Whilst there are 16 risks that are assessed above the boundary risk appetite, commensurate with the approved taxonomy for governance and oversight of the assessed risks, the focus for this report will be on very high graded risks as below:

Assessed Level of Risk	Risk Tolerance Descriptor	Level & Frequency of Review / Assurance
Very High 16 - 25	Risk level exceeds corporate risk appetite and requires immediate corrective action to be taken with monitoring at CMT and Board Level	<ul style="list-style-type: none"> <li>• Every Board Meeting for decision-making and assurance</li> <li>• Every PPRC meeting for decision-making and assurance</li> <li>• Every Audit Committee meeting for assurance</li> <li>• Monthly CMT for discussion and review of mitigation controls, triggers and assessment</li> </ul>

Very High Graded Risks on the Corporate Risk Register as at 17<sup>th</sup> January 2019

There are 3 very high graded risks on the corporate risk register, shown below with the mitigating controls:

ID	Title	Opened Date	Risk level (current)	Mitigating Controls	Risk level (tolerance)	Risk Owner
1450	Ability to maintain existing GM Services across NHS Lanarkshire	14/11/2016	Very High	<ol style="list-style-type: none"> <li>1. Executive group established to highlight and enact potential solutions</li> <li>2. Transforming Primary Care Programme Board is developing a Primary Care Improvement Plan directly linked to the new GMS contract, supported by an implementation plan that aims to increase the number of practitioners working in primary care to support the general medical services.</li> <li>3. A GMS Implementation group has been established and on track to produce a Primary Care Improvement Plan linked to Transforming Primary Care Aims</li> <li>4. GP recruitment and retention fund from Scottish Government to enable local solutions to local problems over 2 financial years.</li> <li>5. Additional Pharmacists and ANPs are being deployed to assist practices in difficulty, however, GP attrition is creating difficulty in matching vacant posts. Work is progressing on a practice to practice basis.</li> <li>6. New abbreviated procurement process approved and in place</li> <li>7. Review of GP Leased Premises to reduce burden on GP's</li> <li>8. Procurement of a community information system to optimise contribution to community services</li> </ol>	Medium	C Campbell

ID	Title	Opened Date	Risk level (current)	Mitigating Controls	Risk level (tolerance)	Risk Owner
1661	European Union Exit (Brexit) Impact on NHS	12/07/2018	Very High	<ol style="list-style-type: none"> <li>1. SG Communication with all Boards on EU Withdrawal Issues</li> <li>2. SG Operational Readiness for EU Withdrawal Checklist has been completed and returned to SG (used at CE development day)</li> <li>3. Implementation of the 'settled scheme status' for EU citizens rolled-out December 2018</li> <li>4. Communication plan through HR on supporting and communicating with EU staff.</li> <li>5. NHSL SLWG to complete SG assessment tools, review the risk analysis and review mitigation.</li> <li>6. Escalation to the SG where mitigation cannot be reached.</li> <li>7. NHSL Business Continuity Plans</li> <li>8. NHSL have agree that a collaborative approach will be taken with the other West of Scotland</li> <li>9. NHS Boards to work together to help address the risks / impacts associated with Brexit</li> <li>10. NHSL European Union Exit Short Life Working Group set up</li> <li>11. Review with Board Chief Executives has led to an agreement that there will be public statements on Brexit made once the detail of the 'deal' or no-deal' position is clear</li> <li>12. Resilience plans to be tested in advance of 29th March 2019</li> <li>13. Director of Pharmacy ongoing engagement with the Scottish Government</li> <li>14. Risk Manager &amp; Chief Executive to maintain vigilance on the ongoing changing position. Fully discussed at CMT on Monday 21st January noting the planned scenario based resilience planning and the 'unknown unknowns'.</li> </ol>	Low	C Campbell



ID	Title	Opened Date	Risk level (current)	Mitigating Controls	Risk level (tolerance)	Risk Owner
1669	Compliance with Data Protection Legislation	16/08/2018		<ol style="list-style-type: none"> <li>1. Extensive range of Information Security policies and procedures</li> <li>2. Established governance arrangements for the management of Information Governance</li> <li>3. Appointment of key roles including; Caldicott Guardian, Data Protection Officer, Senior Information Risk Owner and Chair of IG Committee (Associate Medical Director)</li> <li>4. Established an Information Governance Team with 3 new IG Support roles</li> <li>5. The Project Board continues to meet monthly to progress remaining activities.</li> <li>6. Communication plan in place to ensure key message.</li> <li>7. Training - Learnpro modules on information security have been developed progress is being monitored by GDPR Programme Board - reporting to IG Committee.</li> <li>8. Internal Audit will include GDPR within the 2018/19 audit programme.</li> <li>9. IG Breach incident recording and reporting through IG Committee.</li> </ol>	Low	D Wilson

Very High Graded Risks across NHSL as at 17<sup>th</sup> January 2019

Acute Division: There are 2 very high graded operational risks as set out below:

ID	Title	Opened Date	Risk level (current)	Mitigating Controls	Risk Level (Tolerance)	Owner	Op Div
1012	Treatment Time Guarantee	28/01/2013	Very High	<ol style="list-style-type: none"> <li>1. Clinicians and Clinical Leads regular review patients who have breached 12 weeks/84 days to ensure that the patient still requires surgery and their clinical condition has not changed. Particular focus on patients waiting over 26 weeks being highlighted at DMT and Site Capacity Plan Meetings.</li> <li>2. Weekly and monthly submission of elective performance reporting to SG Access Support Team.</li> <li>3. Regular reporting to governance and operational committees.</li> <li>4. Monthly site capacity meetings ongoing to monitor performance and agree any additional support.</li> <li>5. Contracts awarded for Orthopaedics Treat, Ophthalmology Treat and ENT see and Treat to deliver by 31st March 2019.</li> </ol>	Medium	Mrs J Park	Acute Operating Division
1716	Interventional Radiology	04/12/2018	Very High	<ol style="list-style-type: none"> <li>1. Two interventional radiology posts have been advertised for NHS Lanarkshire, however, there is a national shortage of radiologist.</li> <li>2. A retiring IR consultant is returning in April 2019</li> <li>3. Efficiency and throughput of existing lists is being maximised</li> <li>4. Approaches have been made to colleagues in NHS GC&amp;C to consider a regional solution and/or a case by case basis.</li> </ol>	Medium	Mrs J Park	Acute Operating Division

**iv) Business Critical Project Risk:**

There are no project risks that are assessed as very high for this reporting period.

**v) NHS Lanarkshire Corporate Risk Register**

The full NHS Lanarkshire Corporate Risk Register is subject to continuous review and overseen by the Corporate Management Team. The Register is set out in Appendix 1, sorted in descending order of the risk level (current) from very high to high, accurate as at 17<sup>th</sup> January 2019.

#### 4. STRATEGIC CONTEXT

This paper links to the following:

Corporate Objectives	X	LDP		Government Policy	
Government Directive		Statutory Requirement		AHF/Local Policy	
Urgent Operational Issue		Other: Corporate Governance	X		

#### 5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

##### **Three Quality Ambitions:**

Safe	x	Effective	x	Person Centred	x
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##### **Six Quality Outcomes:**

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	
People are able to live well at home or in the community; (Person Centred)	
Everyone has a positive experience of healthcare; (Person Centred)	
Staff feel supported and engaged; (Effective)	
Healthcare is safe for every person, every time; (Safe)	x
Best use is made of available resources. (Effective)	x

#### 6. MEASURES FOR IMPROVEMENT

The risk register process is subject to monitoring and review monthly through the Corporate Management Team, and quarterly through the Risk Management Process Compliance Reporting, with onwards reporting to the Audit Committee.

#### 7. FINANCIAL IMPLICATIONS

All very high graded risks will be considered in terms of exceeding the defined corporate risk appetite level, review of the adequacy of mitigating controls and action planning that might require a more intensive supported approach to mitigation.

#### 8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

No further risk analysis is required.

#### 9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	x	Effective partnerships		Governance and accountability	x
Use of resources	x	Performance management	x	Equality	
Sustainability					

## 10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

An Equality and Diversity Impact Assessment is not required for this paper as the risks apply equally.

## 11. CONSULTATION AND ENGAGEMENT

The risks expressed and quantified within the register are subject to discussion and review regularly in a number of forums.

## 12. ACTIONS FOR THE BOARD

Board members are asked for:

Approval	x	Endorsement		Identify further actions	
Note	x	Accept the risk identified		Ask for a further report	

Specifically:

- Noting the summary of material changes to the Corporate Risk Register, including the position of new and/or closed risks since the last reporting period
- Approving the NHS Lanarkshire Corporate Risk Profile over time; with the number of risks plotted by likelihood x impact; related corporate objectives and type as at 17<sup>th</sup> January 2019
- Receive assurance on the mitigation of all Very High graded risks across NHSL, noting the change of number of risks emerging and reviewed
- Consider all Very High graded risks in the context of the Healthcare Strategy, Commissioning Plans and decision-making
- Note the detailed Corporate Risk Register, accurate as at 17<sup>th</sup> January 2019, set out in Appendix 1.

## 13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact:

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