

NHS Lanarkshire  
27<sup>th</sup> March 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 January 2019. Since then, the Corporate Management Team have considered the corporate risk register in February and March 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 13<sup>th</sup> March 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 32 risks set out in the NHSL Corporate Risk Register, accurate as at 13<sup>th</sup> March 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 32 risks, with the summary of material changes within this reporting period as below:

Summary of the Material Changes within the NHSL Corporate Risk Register

Closed Risks
<p><b>Risks Closed in February 2019:</b></p> <p>Three (3) risks have been closed:</p> <p>Risk ID 1484 - Off Payroll Workers new Tax Regime (IR35), and potential impact on NHSL effective from 6th April 2017. Low graded risk owned by L Ace. This issue is now business as usual.</p> <p>--</p> <p>Risk ID 1485 - Impact on Service Continuity resulting from implementation of new tax regime (IR35). Medium graded risk owned by L Ace. This issue is now business as usual.</p> <p>---</p> <p>Risk ID 1590 - Ability of NHSL to realise the required savings within year 2018/2019 and deliver a balanced budget. Low graded risk owned by L Ace. Balanced budget predicted and achievable for year end.</p> <p>One (1) risk has been de-escalated from Corporate Level 1 to Public Health Screening Level 3:</p> <p>Risk ID 1597 - Bowel Screening Capacity. This Medium graded risk is owned by G Docherty. Continuous oversight through the monthly public health meetings with six monthly reporting through CMT.</p> <p><b>Risk(s) Closed in March 2019:</b></p> <p>No risks were closed at the March reporting period</p>
New Corporate Risks Identified
<p><b>New Risk in February 2019:</b></p> <p>Three (3) new risks have been recorded :</p> <p>Risk ID 1726 - There is a risk that staff (47 within the cohort) in NHSL inadvertently breach the Standing Financial Instructions (SFI's) within delegated authority in the ees system (commonly known as proxy access) due to a recently identified system failure.</p> <p>This <b>Medium</b> graded risk is owned by J White and has been agreed through CMT.</p> <p>---</p> <p>Risk ID 1727- There is a risk that NHS Lanarkshire will not be able to realise the required savings for 2019/2020 and deliver a balanced budget, with the potential to impact adversely on current and subsequent years financial planning.</p> <p>This risk has been assessed as <b>Very High</b> and is owned by L Ace.</p> <p>-----</p> <p>Risk ID 1728 – There is a risk that contracted NHS beds could be lost because of the Four Seasons Healthcare Group's current financial challenges, leading to the loss of capacity of care of the elderly and mental health continuing care capacity and an immediate need to transition current patients to alternative provision.</p> <p>This risk is assessed as <b>High</b> and is owned by R McGuffie.</p>

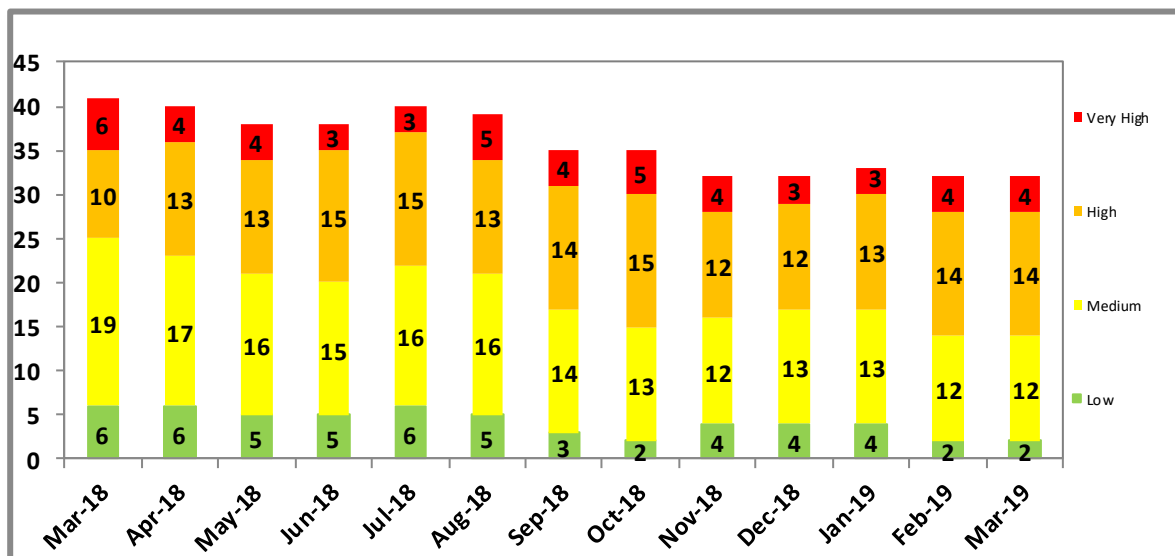
<b>New Risks in March 2019:</b>		
No new risks identified for this reporting period.		
<b>Material Changes of Note for Specific Risks Since the Last Reporting Period</b>		
<b>Risk ID</b>	<b>Description of the Risk and Note of Change Within the Review Period</b>	<b>Risk Owner</b>
1661	<p>There is a risk 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 February</u> Risk reviewed on 4th February. Noted the new controls reflecting the formal Gold Command readiness and the NHSL resilience and scenario planning sessions for CMT 18th Feb and 4th March 2019. Tolerance of risk moved from Low to Medium and will be reviewed as the outcome of a potential 'no-deal' arises. Risk remains graded <b>Very High</b>.</p> <p><u>Note of Review March</u> This risk is subject to continuous review, especially over the period from 12th March until there is some outcome on the political position and the range of voting outcomes. The Risk remains graded <b>Very High</b>.</p>	C Campbell
1379	<p>There is a collective risk that NHSL will not achieve the expected national performance for delayed discharges, resulting from a range of issues, including the undertaking of Community Care Assessments, provision of homecare packages, care home placements, AWI and internal hospital issues eg pharmacy delays. This has the potential to adversely impact on patient outcomes, loss of acute beds, waiting times, treatment time guarantee, hospital flow and reputation of the service providers.</p> <p><u>Note of Change February</u> Mitigating controls fully reviewed, noting that transfer of AWI patients from Acute to Nursing Home where appropriate in the early stages of the AWI process to free up capacity of acute beds has commenced effective from early February 2019, with additional control of on-site presence of H&amp;SCP staff at weekends to support continuous flow at discharge. Assessed level of risk remains <b>High</b>.</p>	C Campbell
643	<p>There is a risk that even by implementing each new Prescribing Action Plan, a suite of prescribing efficient actions and the work of the PQEB, the full expected savings will not be realised resulting from uncertainties across all prescribing areas to carry out the work to achieve improvements in prescribing quality &amp; spend.</p>	J Burns

	<p><u>Note of Change February</u> Noted that there is the development of the sustainability plan to be in effect from April 2019, moving to business as usual. Risk remains graded <b>High</b>.</p>	
1611	<p>There is a risk that NHSL will not meet and sustain the agreed locally adjusted unscheduled care performance targets as profiled for the year 18/19, with the potential to adversely impact on patient experience and the reputation of NHSL.</p> <p><u>Note of Change February</u> Mitigating controls fully reviewed, noting that transfer of AWI patients from Acute to Nursing Home where appropriate in the early stages of the AWI process to free up capacity of acute beds has commenced effective from early February 2019, with additional control of on-site presence of H&amp;SCP staff at weekends to support continuous flow at discharge. Remains a <b>High</b> graded risk.</p>	H Knox
1582	<p>There is a risk that NHSL may breach compliance with the Duty of Candour legislation implemented in April 2018 until the principles and directions are fully embedded.</p> <p><u>Note of Change</u> Additional control noting the undertaking of a review of all adverse events that triggered Duty of Candour, in preparation of setting out the first annual report. Remains a <b>High</b> graded risk.</p>	J Burns
1702	<p>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 &amp; safety, infection control and other environmental hazards to staff and the public, adversely impacting on the reputation of NHSL.</p> <p><u>Note of Change February</u> Controls updated to note the new national contract will be in place effective from 1st April 2019. Remains a <b>High</b> graded risk as NHSL continues to operate in business continuity mode.</p>	C Lauder
1703	<p>There is a risk that NHSL cannot fully respond to the safe and effective management of self-presenting casualties contaminated with chemical, biological or radiological substances as there is insufficiency in trained staff with supporting systems to safely deploy, resulting in the potential for an adverse impact on staff, person(s) affected and potentially business continuity.</p> <p><u>Note of Change February</u> Gap analysis with solutions to inform any changes. Additional control to seek advice through Scottish Government on effective management of low frequency, high impact situations. Remains a <b>High</b> graded risk.</p>	G Docherty

594	<p>There is a risk that NHSL fails to prevent, appropriately identify, investigate and report fraud, bribery and corruption. This has the potential to adversely affect clinical care, staff, the Board's financial position, and the reputation and public perception of NHSL.</p> <p><u>Note of Change February</u> Noted the annual review meetings with Counterfraud Team, and the positive reporting and management of fraud incidents/issues. Remains a <b>Medium</b> risk.</p>	L Ace
1710	<p>There is a risk that NHSL will fail to identify harm to any vulnerable person, child or adult, or prevent harm to others resulting from the complexities of opportunity with the potential for harm to occur, impacting adversely on the reputation of NHSL.</p> <p><u>Note of Change February</u> Controls updated to reflect the appointment of a new Head of Public Protection and the new 2019/2010 Public Protection Strategic Enhancement Plan. Currently a <b>Medium</b> risk.</p>	I Barkby
1669	<p>There is a risk that NHSL is not working in compliance with the data protection legislation, including General Data Protection Regulations (GDPR) and Data Protection Act 2018 (DPA2018), resulting from human error; lack of understanding; ineffective practice and process with the potential to adversely impact on the reputation of NHSL and incur significant financial penalties.</p> <p><u>Note of Review March</u> Mitigating Controls updated to highlight the transition from the Project Board function to business as usual and the outcome from the recent internal audit report. The grading will be reviewed as the recommendations from the internal audit report are implemented. Remains <b>Very High</b>.</p>	D Wilson

ii) **NHSL Corporate Risk Register Profile as at 13<sup>th</sup> March 2019**

The corporate risk profile is shown for the period March 2018 to 13<sup>th</sup> March 2019 below:



Risk Heat map

From the 32 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	1	1	1
	Likely	4	1	1	4	3	1
	Possible	3	1	1	5	9	1
	Unlikely	2	1	1	2	4	1
	Rare	1	1	1	1	1	1

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	2	6	6	2	16
Person - Centred	0	0	0	0	0
Safe	0	6	8	2	16
Totals	2	12	14	4	32

Risk Types

The 32 risks have been further described and set out as risk types below:

	Low	Medium	High	Very High	Totals
Business	1	10	9	4	24
Clinical	1	2	2	0	5
Reputation	0	0	3	0	3
Staff	0	0	0	0	0
Totals	2	12	14	4	32

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	3	
	Possible	3		1	5	9	
	Unlikely	2			2	4	
	Rare	1		1	1		

Whilst there are 18 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 13<sup>th</sup> March 2019

There are 4 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. Paper set-out and discussed at PPRC (June 2018)</li> <li>7. New abbreviated procurement process approved and in place</li> <li>8. Procurement of a community information system to optimise contribution to community services</li> </ol>	Medium	C Campbell



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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 completed and returned SG assessment tools</li> <li>6. NHSL Business Continuity / Resilience Plans being tested in advance of 29th March 2019</li> <li>7. NHSL have agree that a collaborative approach will be taken with the other West of Scotland</li> <li>8. NHS Boards to work together to help address the risks / impacts associated with Brexit</li> <li>9. NHSL European Union Exit Short Life Working Group set up</li> <li>10. 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>11. Director of Pharmacy ongoing engagement with the Scottish Government</li> <li>12. 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 recognising there are 'unknown unknowns'.</li> <li>13. A formal Gold Command will go live as soon as it is agreed through CMT in response to the range of voting outcomes expected before 29<sup>th</sup> March.</li> <li>14. Resilience Training through CMT scheduled for 18th February 2019 and 4th March 2019</li> </ol>	Medium	C Campbell

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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. The final project board will meet on 11 March 2019 with outstanding actions being transitioned to operational management.</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 have completed a Review of Information Assurance 2018/2019 - (L25 - 19) which provides substantial assurance that objectives are being achieved. There were 7 findings which will be fully addressed.</li> <li>9. IG Breach incident recording and reporting through IG Committee.</li> </ol>	Low	D Wilson
1727	Ability of NHS Lanarkshire to realise the required savings within year 2019/20 and deliver a balanced budget	05/02/19		<ol style="list-style-type: none"> <li>1. Continuous Financial Planning, including plans for covering any loss of savings</li> <li>2. Organisation wide efficiency drive with defined programme structure, overseen through CMT</li> <li>3. Requirements for nationally mandated initiatives and policy changes that facilitate the realisation of the balance of the total efficiency savings requirement</li> <li>4. Assessment of service impact from savings, with CRES schemes being risk assessed</li> <li>5. Regular financial scrutiny by Chief Executive, Director of Finance and Director of Strategic Planning through scheduled scrutiny panels meetings.</li> </ol>	Low	L Ace

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Very High Graded Risks across NHSL as at 13<sup>th</sup> March 2019

Acute Division:

There is 1 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	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 as at 25th January 2019. 2. Weekly and monthly submission of elective performance reporting to SG Access Support Team on going at 25th January 2019. 3. Regular reporting to governance and operational committees on going at 25th January 2019. 4. Monthly site capacity meetings ongoing to monitor performance and agree any additional support ongoing at 25th January 2019. 5. Contracts awarded for Orthopaedics Treat, Ophthalmology Treat, Gynaecology Treat, General Surgery Treat and ENT see and Treat to deliver by 31st March 2019. 6. 24 month waiting times improvement capacity plan being developed and will be submitted to DMT in March 2019.	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. Risks from the Monklands Business Continuity Risk Register will be transferred to the Datix system and will be subject to additional review as this develops, with reporting of very high graded risks effective from April 2019.

**v) NHS Lanarkshire Corporate Risk Register**

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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 13<sup>th</sup> March 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 13<sup>th</sup> March 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 13<sup>th</sup> March 2019, set out in Appendix 1.

## 13. FURTHER INFORMATION

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

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