

NHS Lanarkshire
29th May 2019

Lanarkshire NHS Board
NHS Board
Kirklands
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Subject: Risk Management Annual Report

1. Purpose

This paper is coming to the Board:

For approval		For endorsement	X	To note	
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2. Route to the Board

This paper has been:

Prepared		Reviewed	X	Endorsed	
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By the Corporate Management Team at its meeting on 13th May 2019.

3. Background and Summary of Key Issues

The Risk Management Annual Report (attached) sets out the intention to provide assurance to Board Members about the way and the extent to which the management of risk remains a key focus for the Board and the wider organisation. In recognition of the dynamic nature of risk, the systems and processes which support and sustain risk management activity have been kept under ongoing review. As a result, some changes have been introduced to further enhance and strengthen the risk management arrangements. These have previously been considered at, and approved by the Corporate Management Team (CMT).

Based on the 'tone from the top' and 'tone at the middle' principles, leadership and behaviours for an effective risk management culture is demonstrated through the Corporate Management Team in leading, influencing, analysing and interpreting the corporate risks to NHS Lanarkshire in a collaborative transparent way, modelling the approach at middle management level.

From the work undertaken during the year, the agreed evaluation through the Key Lines of Enquiry and the Internal Control Evaluation 18/19 Report, the CMT can confirm that there were adequate and effective risk management arrangements in place throughout 2018 - 2019.

The CMT, as the responsible group for overseeing the risk management systems, has received the following risk management reports throughout 2018/19:

- Monthly Corporate Risk Register Report
- Monthly Corporate Policies Report
- Quarterly Process Compliance Reports, based on the Key Performance Indicators for Risk Register, Adverse Events and Corporate Policies
- Quarterly Summary Report Prepared for the Audit Committee
- Annual Key Lines of Enquiry (self-evaluation of the effectiveness of the risk management systems)
- Risk Management Annual Report
- Review of the Risk Management Strategy

The CMT have also overseen and approved:

- Development work around a corporate policies improvement plan
- Internal audit findings and management actions for corporate policies
- Review of the assurance committee for each corporate risks
- Implementation of improved reporting aligned to the taxonomy of reporting commensurate with the risk appetite and tolerance, including the governance reporting for all corporate risks, including improved reporting
- Development and application of a process to improve integrated risk registers with North and South Integrated Joint Boards (IJB)
- Application of a risk register self- assessment tool
- A programme of mentoring for all project/site/division/unit/corporate services risk management facilitators across NHSL
- Review of the range of KPI's for risk registers and corporate policies
- Review and full updating of the risk management webpage to include 'blog' page and document page for the risk management facilitators across NHSL
- Review of all North H&SCP health risks with the senior management team in partnership with internal audit
- Inclusion of Corporate Risk Manager as part of the Chief Executive Quarterly Performance Review Team, with a focus on mitigation of risks
- Internal audit findings and management actions for corporate policies

Detail of the risk management activity and improvements to the NHSL risk management approach for 2018-2019 is contained throughout the report, concluding with the agreed improvement work for 2019-2020 in the Board's endeavour to enable maturity of its risk management systems.

4. Strategic Context

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	LDP		Government policy	
Government directive		Statutory requirement		AHF / local policy	
Urgent operational issue		Other			

5. Contribution to Quality

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

Three Quality Ambitions:

Safe	<input checked="" type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input checked="" type="checkbox"/>
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6. Measures for Improvement

Adoption and Adaption of the revised Annex F: Key Lines of Enquiry, Audit and Assurance Committee Handbook (2018) as a self-evaluation assessment tool, effective from March 2019.

7. Financial Implications

There are no known financial implications for this report.

8. Risk Assessment/Management Implications

No further risk analysis is required at this stage.

9. Fit with Best Value Criteria

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships		Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance management	<input checked="" type="checkbox"/>	Equality	
Sustainability					

10. Equality and Diversity Impact Assessment

An E&D Impact Assessment has been completed

Yes
 No

An equality and diversity impact assessment is not required for this report, as the approach applies equally.

11. Consultation and Engagement

The annual report will be considered by members of the CMT with onwards reporting to the Audit Committee and the Board of NHS Lanarkshire

12. Actions for the Board of NHS Lanarkshire

Board members are asked to:

Approve		Endorse	X	Identify further actions	
Note		Accept the risk identified		Ask for a further report	

Through consideration of the assurance statement:

‘From the work undertaken during the year, the agreed evaluation through the Key Lines of Enquiry and the Internal Control Evaluation 18/19 Report, the CMT can confirm that there were adequate and effective risk management arrangements in place throughout 2018 - 2019’

13. Further Information

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

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