NHS Board: 30th May 2018

NHS Lanarkshire Kirklands Fallside Road Bothwell G71 8BB Telephone: 01698 855500 www.nhslanarkshire.org.uk



SUBJECT: RISK MANAGEMENT STRATEGY & CODE OF CORPORATE GOVERNANCE: SECTION I RISK MANAGEMENT

1. **PURPOSE**

This paper, with attachments, is coming to the Board

For approval	\square	For endorsement		To note	
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2. ROUTE TO THE LANARKSHIRE NHS BOARD

This paper has been:

Prepared		Reviewed		Endorsed	
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By the Corporate Management Team at its meeting of 30th April 2018, and seeks approval of the NHSL Risk Management Strategy review and update to the Code of Corporate Governance Section I: Risk Management

3. BACKGROUND

Commensurate with the NHSL review of the Code of Corporate Governance, Section I: Risk Management has been fully reviewed and updated to align with the NHSL Risk Management Strategy review period.

The attached documents were reviewed at the same period to align and ensure consistency of the most recent changes that have been agreed for:

- The risk appetite and risk tolerance statement
- Taxonomy of risk review, reporting and assurance
- Responsible Committees and Groups, including the new Population Health & Primary Care Committee and the Acute Governance Committee
- Roles and Responsibilities
- Risk matrix
- Glossary of Terms

CMT members have considered and approved the attached documents noting the changes above and the 'read across' of the documents to ensure alignment and consistency with the content. It was also noted that the product of any other improvements to the risk management systems, including the Health and Social Care integration, may lead to further changes within the year 2018/19.

The Risk Register Policy has also recently been updated and aligned to these 2 key risk management documents.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives		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:

	1	1	
Safe	Effective	Person Centred	

6. MEASURES FOR IMPROVEMENT

As outlined within the attached paper

7. FINANCIAL IMPLICATIONS

There are no immediate financial implications from 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	Effective partnerships	Governance and	
		accountability	
Use of resources	Performance	Equality	
	management		
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 effective management or risk applies equally.

11. CONSULTATION AND ENGAGEMENT

Consultation and Engagement to be agreed as part of the proposed way forward

12. ACTIONS FOR THE BOARD

The Board is asked to:

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

Specifically Board members are asked to:

- Approve the fully revised and updated component part of the overall NHSL Code of Corporate Governance : Section I : Risk Management
- Approve the NHSL Risk Management Strategy, noting the alignment to the Code of Corporate Governance Section I : Risk Management and the material change to include the Population Health, Primary Care and Community Services Governance Committee with the Acute Governance Committee function
- Note that the product of the work currently underway to improve the integrated risk register approach as part of the overall Health & Social Care Integration agenda has the potential to require some further changes within year 2018/19
- Note that the Risk Register Policy was also reviewed and aligned to these 2 key risk management documents

13. FURTHER INFORMATION

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

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