

NHS Board meeting  
30 October 2019

Lanarkshire NHS Board  
NHS Board  
Kirklands  
Bothwell  
G71 8BB  
Telephone: 01698 855500  
[www.nhslanarkshire.scot.nhs.uk](http://www.nhslanarkshire.scot.nhs.uk)



**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 August 2019. Since then, the Corporate Management Team have considered the corporate risk register in September and October 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 significant material changes to the Corporate Risk Register, including new and closed risks, since the last reporting period. A record of other changes to the corporate risk register can be seen in Appendix 1
- 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 16<sup>th</sup> October 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/redesign, including the very high graded risks on the Monklands Business Continuity Risk Register
- v) Facilitate reference to the 33 risks set out in the NHSL Corporate Risk Register, accurate as at 16<sup>th</sup> October 2019 and sorted in descending order by the assessed level of risk (current) from very high to low (Appendix 2)

i) **Summary of Significant 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 significant material changes during September and October highlighted as below. A record of other changes from review of the corporate risk register can be viewed in Appendix 1.

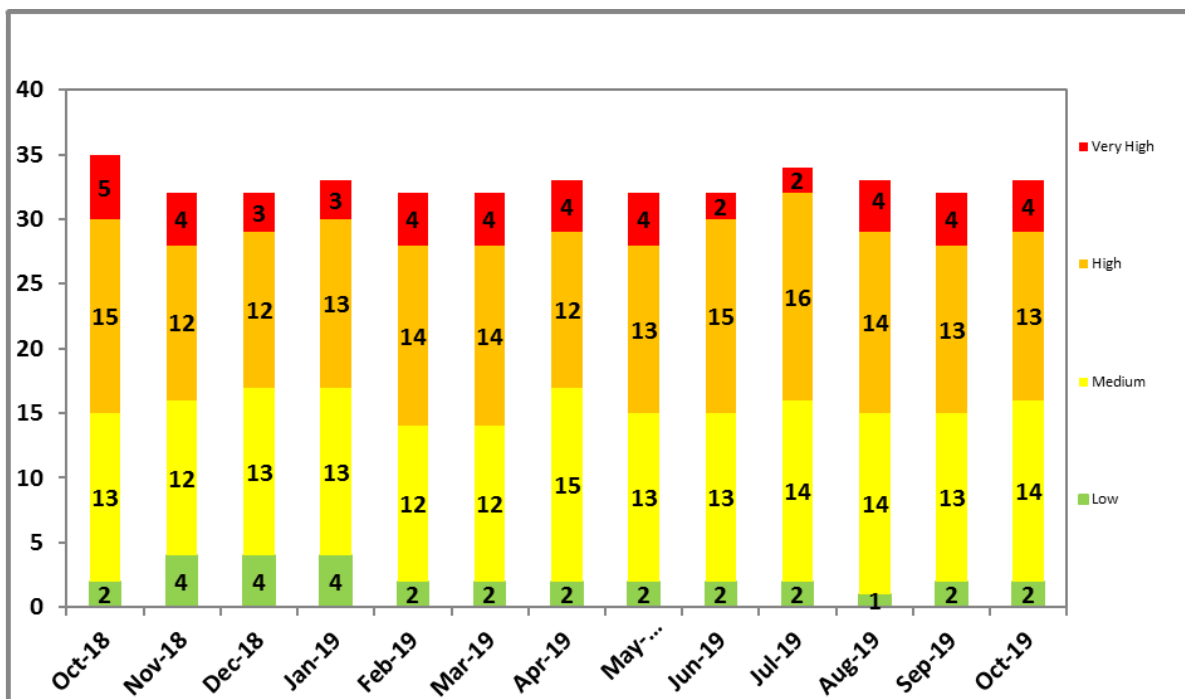
**Summary of the Significant Material Changes within the NHSL Corporate Risk Register**

<b>Closed Risks</b>		
<b>Risks Closed in September 2019:</b>		
<p><u>Closed Risk ID 1412</u> - GP input to sustain current community hospital clinical model of service.</p> <p>This <b>Medium</b> graded risk has been closed following monitoring of position with other hospitals and note of confirmation to ISD on change of designation of in-patient facility. This risk was owned by V DeSouza.</p> <p>-----</p>		
<b>Risks Closed in October 2019:</b>		
<p><u>Closed Risk ID 244</u> - There is a risk that NHSL does not comply fully with statutory requirements and obligations potentially exposing NHSL to prosecution, improvement notices and / or corporate homicide.</p> <p>This <b>Medium</b> graded risk was opened as a <b>high</b> risk in 2008 and was fully considered by CMT noting that this risk was significant at the point in time when the 3 Acute Hospitals, the Community &amp; Primary Care Services and the Board integrated to become 1 Health Board. The risk review took into consideration the management and oversight of the current legislation register, breaches of regulation risk and the attention given to new legislation e.g. GDPR, Duty of Candour as it comes into effect. This risk is now closed.</p>		
<b>New Corporate Risks Identified</b>		
<b>New Risks in September 2019:</b>		
No new risks were opened in September		
<b>New Risks in October 2019:</b>		
<p><u>New Risk ID 1828</u> - There is a risk that in response to the initial HSE Notice of Contravention in December 2018, the North and South H&amp;SCP will not be fully compliant with the minimum KPI% rate for moving and handling learning and training by December 2019. This is assessed as a <b>Medium</b> risk and is owned by both V De Souza and R McGuffie.</p>		
<b>Significant Material Note of Change 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
1799	<p>There is a risk that the contracted company ISS are not able to deliver and maintain the necessary range of support services to UHH through effective business continuity planning in the event that industrial action is confirmed. Loss of support services has the potential to adversely impact on other staff members and continuity of delivery of clinical services across UHH.</p> <p><u>Note of Change September</u> Significant discussion with national officers and GMB has resulted in members accepting the revised offer. Unison still in negotiation. Risk level reduced from <b>High</b> to <b>Low</b>.</p>	C Lauder

<p>1450</p>	<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. In addition, to these changes, there is a limit to the hours senior doctors are willing to work, 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.</p> <p><u>Note of Change October</u> Updated action to a control to reflect recent implementation of interim 2C practice models with consideration to a future model e.g. locality or central management model in response to any practice contract being returned to the Board. Risk remains graded as <b>very high</b>.</p>	<p>C Campbell</p>
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ii) **NHSL Corporate Risk Register Profile as at 16<sup>th</sup> October 2019**

The corporate risk profile is shown for the period October 2018 to 16<sup>th</sup> October 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 heat map below:

			IMPACT				
			Negligible	Minor	Moderate	Major	Extreme
		Score	1	2	3	4	5
LIKELIHOOD	Almost Certain	5					
	Likely	4			5	3	1
	Possible	3		1	7	8	
	Unlikely	2			3	3	
	Rare	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	1	6	8	1	16
Person - Centred	0	0	0	0	0
Safe	1	8	5	3	17
Totals	2	14	13	4	33

Risk Types

The 33 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	2	2	0	4
Staff	0	0	0	0	0
Totals	2	14	13	4	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					
	Likely	4			5	3	1
	Possible	3		1	7	8	
	Unlikely	2			3	3	
	Rare	1		1	1		

Whilst there are 17 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 16<sup>th</sup> October 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. 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. 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>5. New abbreviated procurement process approved and in place</li> <li>6. Review of GP Leased Premises to reduce burden on GP's now going through the national process</li> <li>7. Procurement of a community information system to optimise contribution to community services</li> <li>8. Work with NES to optimise the use of trainees.</li> <li>9. NHSL has recently implemented interim 2C practice models with consideration to a future model e.g. locality or central management model in response to any practice contract being returned to the Board.</li> </ol>	Medium	C Campbell
1587	Sustainability of the 2 site Model for OOH Service	13/12/2017	Very High	<ol style="list-style-type: none"> <li>1. Rates of Pay have been maintained at summer rates until end of Sept 2019.</li> <li>2. BCP in place and work is currently underway to develop an escalation plan for any redirection to A&amp;E.</li> <li>3. OOH report on anticipated weekend activity and staffing at CMT weekly. Exception report against this will also be put in place.</li> <li>4. Workforce action plan in place - linked to GMS sustainability.</li> <li>5. Regular reporting mechanism for North and South IJBs.</li> <li>6. OOH performance reporting will be a standing item on the performance and audit sub-committee.</li> <li>7. There is a weekly update meeting on the OOH risk register and action plan which includes operational managers and professional leads.</li> <li>8. There is work ongoing with NHS 24 to review processes and procedures in relation to triage.</li> </ol>	Medium	V DeSouza

ITEM 21A

ID	Title	Opened Date	Risk level (current)	Mitigating Controls	Risk level (tolerance)	Risk Owner
1661	European Union Exit (Brexit) Impact on NHSL	12/07/18	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</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 continuously being tested in advance of final deal and on-going</li> <li>7. NHSL have agreed that a collaborative approach will be taken with the other West of Scotland NHS Boards to work together to help address the risks / impacts associated with Brexit and on-going</li> <li>8. NHSL European Union Exit Short Life Working Group set up and can be re-instated at short notice.</li> <li>9. Resilience Training through CMT completed 18th February 2019 and 4th March 2019</li> <li>10. The formal Gold Command effective from April 2019 was suspended for a short period in light of the extended time period, however, the position has been re-instated effective from 7th October 2019.</li> <li>11. Dedicated EU Withdrawal page on Firstport with contemporary information regarding exit plans</li> <li>12. Co-ordinated issue and risk process local to NHSL and for reporting to Scottish Government, although suspended in the interim until there are any further developments/decisions</li> <li>13. Standing agenda item on CMT with continuous oversight of emerging issues</li> <li>14. Update paper to the Board of NHS Lanarkshire prepared for August 2019 with refresher training for all executive Directors and review of all high and very high graded risks.</li> <li>15. Assessment of level of preparedness reported to Scottish Government September 2019.</li> <li>16. Roadshow events scheduled for October have commenced</li> <li>17. All on-call Directors instructed to register with Resilience Direct for access to up to date information on their website.</li> </ol>	High	C Campbell
1815	Ability of NHS Lanarkshire to realise the required savings within year 2020/21 and deliver a balanced budget	14/08/19	Very High	<ol style="list-style-type: none"> <li>1. Early Identification of Savings Programme</li> <li>2. Set-up of Programme Management Office with Programme Lead &amp; Project Plan</li> <li>3. Dedicated CMT Financial Meetings</li> <li>4. Intelligence gathering and scenario planning</li> </ol>	Medium	L Ace

ITEM 21A

Very High Graded Risks across NHSL as at 16<sup>th</sup> October 2019

**Acute**

There are 2 very high graded risks owned and managed within the Acute Division. From the last reporting period, Risk ID 1012 - Treatment Time Guarantee has been reduced from Very High to High. A new risk (ID 1804) has emerged as below:

ID	Title	Open Date	Risk level (current)	Mitigating Controls	Risk Owner
1804	Acute Waiting Times Improvement Plan (Outpatients)	07/08/19	Very High	<ol style="list-style-type: none"> <li>1. Work closely with specialty teams to redesign patient pathways, work continues at 26th September 2019.</li> <li>2. Robust monitoring process in place with the independent sector partners to ensure contracts are delivered on time through monthly information updated. Next submission due end October 2019.</li> <li>3. Regular updates provided to DMT continues at 26th September 2019.</li> <li>4. Regular reports provided to Acute Governance Committee. Last update 18th September 2019. Next update due 20th November 2019.</li> <li>5. Contracts awarded for Quarter 3 and 4 for Gastroenterology, Neurology, and Ophthalmology. September 2019</li> </ol>	J Park
1716	OOH Interventional Radiology Service	04/12/18	Very High	<ol style="list-style-type: none"> <li>1. Part time Locum interventional radiologist commenced 22nd July 2019, based at Hairmyres for 3 months in the first instance.</li> <li>2. Efficiency and throughput of existing lists is being maximised at 7th August 2019.</li> <li>3. Discussions with NHSL Lothian regarding formalising Trans jugular Intrahepatic Creation of Porto systemic Shunt (TIPPS) took place on 2nd August 2019. Data currently being scoped to inform further discussions on the way forward.</li> <li>4. Contingency plans in place at 7th August 2019.</li> <li>5. The WoS Regional group has met and commissioned a piece of work to scope options for OOH service (one hub or two hubs) and that this paper will be shared with key stakeholders in each Board for comment. The plan is to submit the paper to CEO meeting in late Summer 2019.</li> <li>6. Ongoing discussions with Regional team.</li> <li>7. WoS approach to interventional delivery ooh is still being discussed. No change to NHSL position.</li> </ol>	J Park



## ITEM 21A

### North / South Health & Social Care Partnership

For this reporting period, there is one (1) very high graded risk for South Health & Social Care Partnerships arising through the Primary Care Implementation Plan:

ID	Title	Open Date	Risk level (current)	Mitigating Controls	Risk Owner
1793	PCIP - Ability to maintain existing GM Services across NHS Lanarkshire	18/07/19	Very High	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. 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.	V De Souza

For this reporting period, there are no very high graded risks within North Health & Social Care Partnership.

### Business Critical Project/Redesign Risks Assessed as Very High

There is currently no very high graded business critical project/redesign risks

## ITEM 21A

### Monklands Business Continuity Risks Assessed as Very High

There are now 7 very high graded risks on the Monklands business continuity risk register. At the quarterly review by the project team in September, risk ID 1783 moved from a high risk to a very high graded risk. These risks are set out below:

ID	Title	Open Date	Risk level (current)	Mitigating Controls	Risk Owner
1763	Current fire alarm cause and effect does not reflect how staff should react in the event of fire.	27/06/19*	Very High	1. Control book holders are regularly briefed by a local Fire Officer on fire procedure. 2. Regular training tailored to patient/ ward areas has been commissioned. 3. NHSL Fire Officers will prepare a Cause and Effect document for the Towers identifying how areas should react etc. This will then be issued to GC for survey and establishing current arrangements.	C Lauder
1765	Fire compartment condition of area under the ward towers, ground and lower ground floor.	27/06/19*	Very High	1. FSW 7 (1B): design for 60min compartmentation within the GF and LGF have been completed. Works programmed to commence in November 2019.	C Lauder
1784	Access to maintain fire dampers	27/06/19*	Very High	Estates programme of improvements to allow access to known fire damper locations will be completed by 27th September.	C Lauder
1773	Deterioration/failure of cast iron pipes	27/06/19*	Very High	1. Priority areas of work have been identified and completed in March 18 and Sept 18. 2. Priorities for the next Phase of works in 19/20 have been identified and surveys completed and report reviewed with NHSL. 3. Programme for Stage 2 access to be developed.	C Lauder
1788	Loss of endoscopy service due to drainage issues	27/06/19*	Very High	Issues have reoccurred following initial NHSL Estates works. Brief developed for Graham to progress a design solution to isolate the use of the problematic drainage.	C Lauder
1789	Loss of RDVU service due to drainage issues	27/06/19*	Very High	Issues have reoccurred following initial NHSL Estates works. Brief developed for Graham to progress a design solution to isolate the use of the problematic drainage.	C Lauder
1783	Day Surgery theatre ventilation non-compliant and risk of failure	27/06/19*	Very High	Feasibility survey and annual validation have highlighted the poor condition and risk of non-compliant performance/breakdown. Graham instructed to review roof structure for locating 2nr new AHUs on the roof.	C Lauder

\* date transferred to datix.

## ITEM 21A

### **iv) 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 2, sorted in descending order of the risk level (current) from very high to high, accurate as at 16<sup>th</sup> October 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 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 / FAIRER SCOTLAND DUTY**

An Equality and Diversity / FSD 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:

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

Specifically:

- Noting the summary of significant material changes to the Corporate Risk Register, including the position of new and/or closed risks since the last reporting period
- Any other changes to the corporate risk register for this reporting period are recorded in Appendix 1
- 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 16<sup>th</sup> October 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 Corporate Risk Register, accurate as at 16<sup>th</sup> October 2019, set out in Appendix 2.

**13. FURTHER INFORMATION**

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

Mr Calum Campbell  
Chief Executive  
01698 858176

Mrs C McGhee  
Corporate Risk Manager  
01698 858094

Mr Paul Cannon  
Board Secretary  
01698 858181