



# NHS Lanarkshire Corporate Risk Register Overview

NHSL Board

Reporting Period: November 2023 – January 2024

# NHSL Corporate Risks – Dashboard

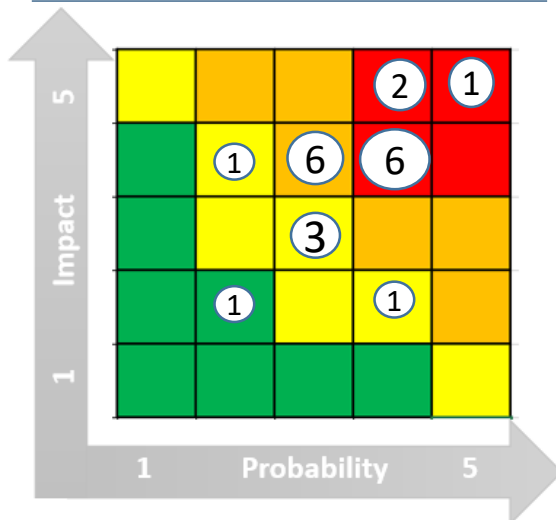
## Executive Summary

- All risks on the Corporate Risk Register have an update requested monthly.
- Risk Management Strategy was approved by Audit & Risk Governance Committee, Risk Management Policy has been included in CMT agenda for approval.
- Work is ongoing to ensure that risks on the Corporate Risk Register are a reflection of the Corporate Objectives.
- Risk register report has been altered to capture Mitigating Controls separately from Planned Actions.

Risk Register	Number of Risks
Corporate	21

Risk movement since last report							Change
No Change	Increase	Decrease	New	Closed	Escalated	De-escalated	
11	1	3	-	-	-	-	6

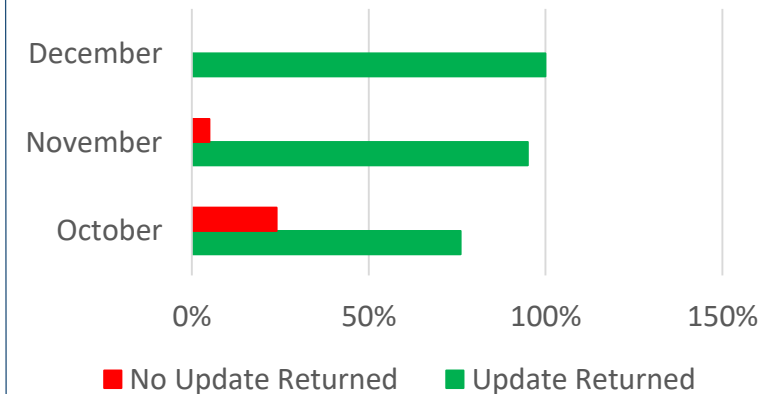
## Corporate Risk Heat Map



## Highest Scoring Corporate Risk

Risk	Score	Trend
2197 Ability of NHS Lanarkshire to Deliver a Balanced Budget within Periods 23/24 – 25/26	25	

## Corporate Risks Updated













# Corporate Risks - Summary

Ref	Risk Title	Oct	Nov	Dec	Risk Trend	Target Score	Commentary
2197	Ability of NHS Lanarkshire to Deliver a Balanced Budget within Periods 23/24 – 25/26	25	25	25		9	Risk reviewed by Laura Ace - Although 23/24 position improved, 24/25 budget offered less funding than forecast so risk of not balancing over 3 years remains very high . Actions updated.
2218	Urgent & Unscheduled Care	20	20	20		6	Risk reviewed by Russell Coulthard: Unscheduled Care performance for December 23 was 56%. Although this remains below trajectory it compares favourably with Dec 22 performance at 45%. All monitoring and actions remain in place through acute divisional structure and through the continued work of Operation Flow. Additional system response and escalation measures implemented in Nov and Dec including enhanced senior clinical decision makers in Flow Navigation Centre, partial implementation of consultant led REACT model in EDs and full system Ladder of Escalation process.
2219	Planned Care	20	20	20		6	Risk reviewed by Russell Coulthard: Risk remains although progress noted. NHSL remains above the Scottish average for 31 and 62 day cancer performance and progress with very long OP waits continues.
2222	Nurse Agency Usage	16	16	16		4	Risk reviewed by Eddie Docherty: Risk remains high and control and actions remain relevant. Will continue to monitor and work through in order to minimise impact but ensuring patient safety within a challenging environment.
2038	Procurement of new NHS Lanarkshire Labs Managed Service Contract	16	16	16		4	Risk reviewed by Russell Coulthard: Risk remains unchanged. Monitoring of existing equipment performance and progress of alternative procurement continue.
2221	Non-Compliance with Off-Framework DL(2023)5	9	9	4		4	Risk reviewed by Eddie Docherty: Proposed decrease to risk score bringing risk into line with target set. NHS Lanarkshire is now compliant with DL(2023)5 however given the challenges in the system we will continue to monitor this as a potential risk.

# Corporate Risks - Summary

Ref	Risk Title	Oct	Nov	Dec	Risk Trend	Target Score	Commentary
2234	Nursing Home Beds	12	12	12		6	Risk reviewed by Trudi Marshall, Nurse Director HSCP North: Risk remains unchanged in terms of score. No further notification closures at this time and work continues via the care home assurance and support board to help support and stabilise care homes that are experiencing challenges. Monthly report continues to be submitted to SG.
2135	Heightened Cyber Threat	16	16	16		6	Procurement have queried the contract, Digital Contract Manager is currently working with to resolve queries. Planning to proceed Q1 2024.
2155	Impact of Unpredictable Public Health Outbreaks on Current Services	12	12	12		6	Risk reviewed by Josephine Pravinkumar: Current controls remain valid and are still in place, there are no additional controls to be added at this time. All actions have been implemented and none have seen any significant change since last review in November 2023. No change to current score since last review in November 2023.
1703	Safe and Effective Decontamination of Casualties Exposed to Chemical, Biological or Radiological Substances.	12	12	12		4	3/1/24: Risk reviewed by Josephine Pravinkumar: Current controls remain valid and are still in place, there are no additional controls to be added at this time. All actions have been implemented and none have seen any significant change since last review in November 2023. No change to current score since last review in November 2023.
2150	Ability to maintain General Medical Service provision	16	16	16		12	Risk reviewed by Soumen Sengupta: No change to risk at present. Controls and actions remain appropriate. Fuller update on this risk to be provided in New Year after review by Chief Officer and Medical Director, South HSCP

# Corporate Risks - Summary

Ref	Risk Title	Oct	Nov	Dec	Risk Trend	Target Score	Commentary
2126	Sustaining Primary Care Out of Hours Service	16	12	12		9	Risk reviewed by Soumen Sengupta: No change to risk at present. Controls and actions remain appropriate. Note is made of the appointment of new Depute Clinical Director within the service.
2129	Sustaining Whole System Patient Flow	16	16	16		9	Risk reviewed by Ross McGuffie: Additional control added
2213	Ability to Respond to Climate Change	9	9	9		9	Risk reviewed by Colin Lauder: No further change to risk and controls and actions remain appropriate.
2212	Failure to Comply with NHS Sustainability Policy, DL (2021) 38	12	16	16		9	Risk reviewed by Colin Lauder: No further change to risk and controls and actions remain appropriate.
2039	Staff Fatigue, Resilience, Wellbeing & Safety	12	12	12		6	4/1/24: Risk reviewed by Jacqui Jones: No further change to risk and controls and actions remain appropriate.
2124	Sustaining a safe workforce	12	12	12		9	4/1/24: Risk reviewed by Jacqui Jones: No further change to risk and controls and actions remain appropriate.
1710	Public Protection	9	9	9		9	Risk reviewed by Eddie Docherty: Controls and actions remain appropriate and risk remains unchanged.
2230	UHM Fire Safety Waste Receptacles	8	8	8		6	Risk reviewed by Colin Lauder: No further change to risk and controls and actions remain appropriate.
594	Prevention & Detection of Fraud, Bribery and/or Corruption	8	8	8		6	Risk reviewed by Laura Ace - Actions updated, no change to risk level.
2062	Development of the New Healthcare Strategy, Our Health Together	9	9	9		9	Risk reviewed by Colin Lauder: No further change to risk and controls and actions remain appropriate.






# Detail of Risk Movement

## Movements in Corporate Risks within period November 2023 – January 2024

Risk		Score	Trend	Target Score	Commentary
2038	Procurement of a new NHS Lanarkshire Labs Managed Service Contract	16	Change	9	New action was been added to this risk (previously no actions identified) <b><i>(Due to reporting period overlap, this was noted at December 2023 Board)</i></b>
2135	The Impact from Heightened Cyber Threat	16	Change	9	Agreed at Digital Risk Meeting, this Risk has been reviewed, and combined with Risk 1364 (which has been closed off). Control section updated to reflect Controls in place, separating out to Governance and Technical sections. New mitigations proposed for approval, Annual PEN testing, and targeted Phishing Simulations. NOTE: Title changed to - The Impact from Heightened Cyber Threat <b><i>(Due to reporting period overlap, this was noted at December 2023 Board)</i></b>
2155	Impact of Unpredictable Public Health Outbreaks on Current Services	12	↓	9	Change to risk score proposed by Director of Public Health to reflect additional actions being taken. Impact is a 4 due to the delay in recovery of all PH services since the pandemic and the health status of our population. Update to existing action (2). <b><i>(Due to reporting period overlap, this was noted at December 2023 Board)</i></b>
2234	Nursing Home Beds	12	Change	9	Action updated: New structure and TOR have been signed off and transition has commenced. 1 further care home has notified us of intention to close which is being managed through the established process. All other mitigations remain in place and no change to risk level. <b><i>(Due to reporting period overlap, this was noted at December 2023 Board)</i></b>
2212	Failure to Comply with NHS Sustainability Policy, DL (2021) 38	16	↑	9	Proposed Change to Score with increase from High to Very High: Capital allocation from SG was £2.2M vs the £6M bid for. Without appropriate funding investment to substantially improve the energy efficiency of our buildings as outlined within our Route map to Net Zero, we have no prospect of achieving Net Zero by 2040.

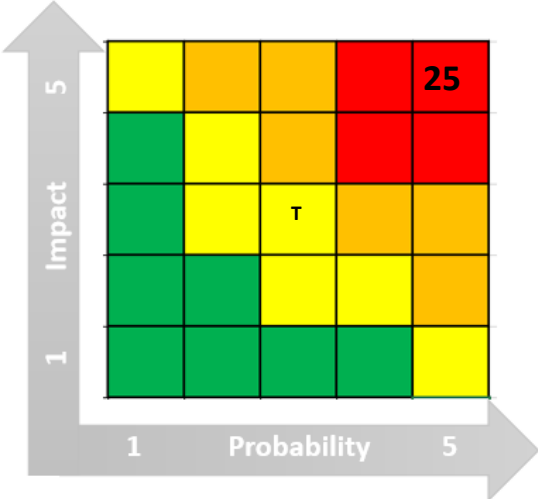
# Detail of Risk Movement

## Movements in Corporate Risks within period October 2023 – December 2023

Risk		Score	Trend	Target Score	Commentary
2126	Sustaining Primary Care Out of Hours Service	12		9	Proposed Change to Score with decreased from Very High to High: Service has enhanced their team with the addition of new recruits ahead of winter and as part of overall winter preparedness. Comms planned in respect of public messaging in relation to the right care at the right place and reminding patients (where appropriate) to have an adequate supply of prescription medication ahead of the upcoming festive holidays.
594	Prevention & Detection of Fraud, Bribery and/or Corruption	8		6	Action 2 updated (highlighted in red on the following 'Corporate Risk in Focus' page)
2129	Sustaining Whole System Patient Flow	16		9	Additional Mitigating Control added (highlighted in red on the following 'Corporate Risk in Focus' page)
2197	Ability of NHS Lanarkshire to Deliver a Balanced Budget within Periods 23/24 – 25/26	25		9	New actions added for this risk (highlighted in red on the following 'Corporate Risk in Focus' page)
2221	Non-Compliance with Off-Framework DL(2023)5	9		4	There were two decreases to risk score for this risk in the 3-month reporting period. Risk was originally decreased from Very High to Medium due to significant reduction to use of off framework almost to nil, with final reductions by end of October 2023. Subsequently decreased again from Medium to Low (bring risk into line with target set). NHS Lanarkshire is now compliant with DL(2023)5 however given the challenges in the system we will continue to monitor this as a potential risk.

# Corporate Risk in Focus – Change

**2038 - Procurement of a new NHS Lanarkshire Labs Managed Service Contract**



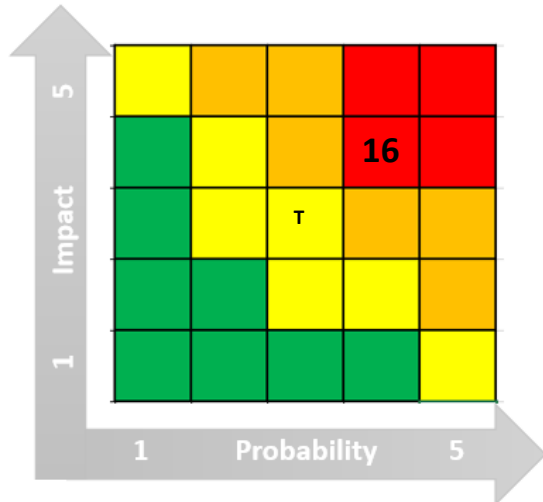
Risk Trend	Change to Risk Actions
New action has been added to this risk (previously no actions identified)	

Risk Description	Risk Owner	Risk Lead
here is a risk of disruption to the NHS Lanarkshire Labs Managed Service Contract, because the Laboratories Managed Service Contract (Labs MSC) is one of the most significant contracts that the Health Board has both in terms of annual value and clinical criticality and it has recently come to the end. This may result in providing an inadequate laboratory service, impact patient care and present reputational damage to the Board.	Judith Park	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> <li>1. Project Board in place which is the vehicle to manage &amp; implement the new contract.</li> <li>2. Project Board reviews and manages project risk register in relation to individual risks with tender/procurement process.</li> <li>3. Progress of work is monitored through</li> </ol>		
Actions		
<ol style="list-style-type: none"> <li>1. Development of monitoring framework to report on downtime and other equipment vulnerabilities.</li> </ol>		



# Corporate Risk in Focus – Change

## 2135 - The Impact from Heightened Cyber Threat

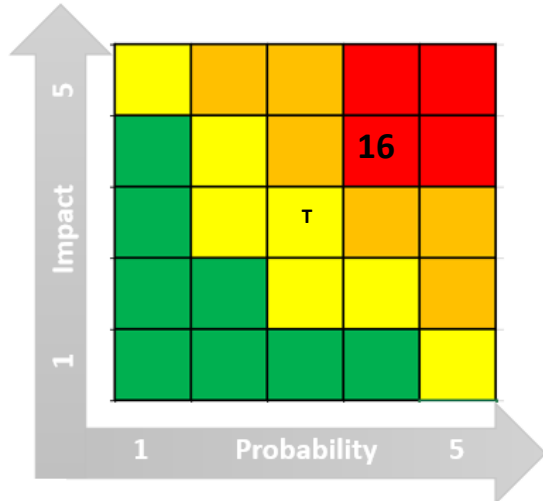


<b>Risk Trend</b>	Change to Risk Title with Update to Controls/Actions
<p>Agreed at Digital Risk Meeting, this Risk has been reviewed, and combined with Risk 1364 (which has been closed off). Control section updated to reflect Controls in place, separating out to Governance and Technical sections. New mitigations proposed for approval, Annual PEN testing, and targeted Phishing Simulations. NOTE: Title changed to - The Impact from Heightened Cyber Threat</p>	

Risk Description	Risk Owner	Risk Lead
There is an ongoing, and continual, risk of malicious Cyber Security breaches across digital services and/or data within NHS Lanarkshire, potentially leading to significant service disruption, and impact adversely on the organisations reputation.	Donald Wilson	Jann Gardner
Current Controls		
<p>Cyber Security Sub Group reporting to IG Committee. This will oversee Cyber Action Plan and NIS programme of work.</p> <ul style="list-style-type: none"> <li>Alignment of action plans from all the identified controls with risk assessment through the national cyber resilience framework and current work streams.</li> <li>Annual review and audit by competent authority for NIS compliance status. NIS action plan developed and project managed continually.</li> <li>Cyber Security Information Dashboard developed to manage/monitor key metrics.</li> <li>Higher vigilance, continuous briefing and alerting staff on minimising malicious Cyber-attack.</li> <li>Adopting, and continually reviewing, NCSC best practice for all Cyber aspects.</li> <li>Membership of, and contribution to National Teams Channels, collaboration of intel and advice.</li> <li>Regularly review mainstream/social media, vendor and cyber sources for up to date and emerging threats.</li> <li>Ensure all Cyber Security staff are fully versed/certified in Cyber industry best practices and NHS Lanarkshire Cyber toolset.</li> <li>Monitor early warning sources such as those provided by NSCS, CISP etc.</li> <li>Regular Cyber related advice and targeted campaigns across all staff within board.</li> <li>External contract procured for Specialist Cyber Security Incident Response, 24/7 tactical response, with rolling monthly review meeting of new threat factors and detections.</li> <li>Regularly review and report on UAC breaches.</li> <li>Review and document additional risks (NAC/ZTNA/IOT etc)</li> </ul> <p>Cont.../ over page</p>		

# Corporate Risk in Focus – Change

2135 - The Impact from Heightened Cyber Threat Cont..../  
Threat Cont..../

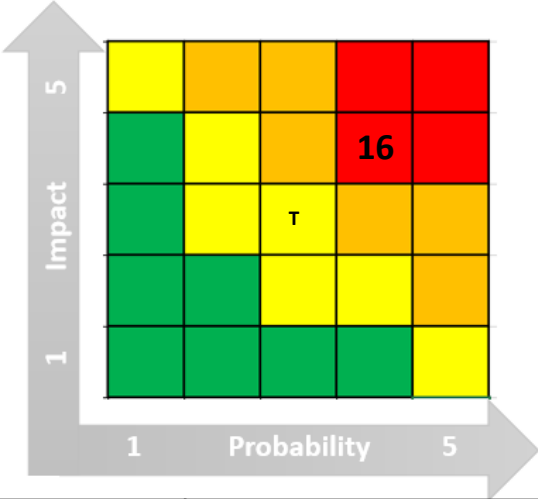


<b>Risk Trend</b>	Change to Risk Title with Update to Controls/Actions
<p>Agreed at Digital Risk Meeting, this Risk has been reviewed, and combined with Risk 1364 (which has been closed off). Control section updated to reflect Controls in place, separating out to Governance and Technical sections. New mitigations proposed for approval, Annual PEN testing, and targeted Phishing Simulations. NOTE: Title changed to - The Impact from Heightened Cyber Threat</p>	

Risk Description	Risk Owner	Risk Lead
There is an ongoing, and continual, risk of malicious Cyber Security breaches across digital services and/or data within NHS Lanarkshire, potentially leading to significant service disruption, and impact adversely on the organisations reputation.	Donald Wilson	Jann Gardner
Current Controls		
<p>Controls Cont.../ Technical Controls</p> <ul style="list-style-type: none"> <li>• Deploy and continually review Microsoft Windows 10 Secure Build, as per industry best practice.</li> <li>• Enterprise Endpoint + Server Advanced Security Platform deployed across full estate. Regularly reviewed and configured to mitigate known and emerging threats.</li> <li>• Advanced Hardware Firewalls deployed. Further modular security enhancements partially enabled.</li> <li>• Implementation of timely software patches to address known vulnerabilities on a scheduled and regular basis.</li> </ul> <p>Compliance monitored via Cyber Security Information Dashboard.</p> <ul style="list-style-type: none"> <li>• Regular (annual) penetration testing of external attack surface by Third Party Specialist. Findings reviewed and mitigations actioned.</li> <li>• Integration of board level Microsoft Security Tools (Defender for Endpoint, Server, and Identity) in to NSS Cyber Security Operations Centre.</li> <li>• Regular scheduled, or bespoke, Vulnerability Scans undertaken across full Server/Client estate, and targeted key infrastructure, board wide, to ensure full visibility of unpatched services and open shares.</li> <li>• Deployed and monitored Security Information and Events Management cloud platform. Fully integrated with all Servers and Client Endpoint OS, based on industry best practices. Other key services to follow 4th Quarter 2023.</li> <li>• Web Proxy system deployed to ensure all staff internet access is safely filtered.</li> <li>• Deploy NAC solution to secure unauthorised access to network (POC stage)</li> <li>• Regularly review Internal/External Access Controls (staff/supplier) to ensure ongoing compliance and suitability.</li> </ul>		

# Corporate Risk in Focus – Change

**2135 - The Impact from Heightened Cyber Threat Cont...../**

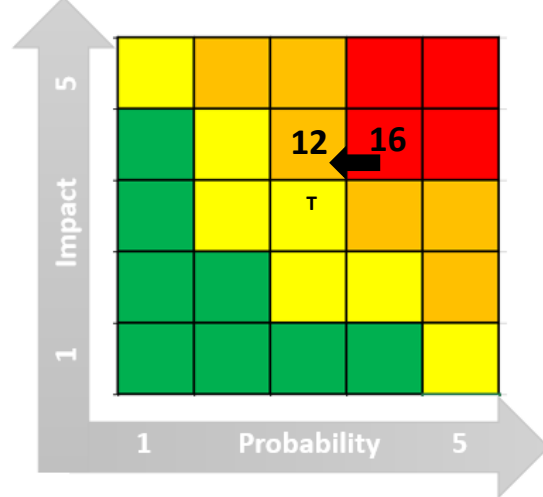


Risk Description	Risk Owner	Risk Lead
There is an ongoing, and continual, risk of malicious Cyber Security breaches across digital services and/or data within NHS Lanarkshire, potentially leading to significant service disruption, and impact adversely on the organisations reputation.	Donald Wilson	Jann Gardner
Current Controls		
Control detailed on previous slides		
Actions		
1. New mitigations proposed and scoped for approval, Annual PEN testing, and targeted Phishing Simulations.		

Risk Trend	Change to Risk Title with Update to Controls/Actions
<p>Agreed at Digital Risk Meeting, this Risk has been reviewed, and combined with Risk 1364 (which has been closed off). Control section updated to reflect Controls in place, separating out to Governance and Technical sections. New mitigations proposed for approval, Annual PEN testing, and targeted Phishing Simulations. NOTE: Title changed to - The Impact from Heightened Cyber Threat</p>	

# Corporate Risk in Focus – Decrease

## 2155: Impact of Unpredictable Public Health Outbreaks on Current Services

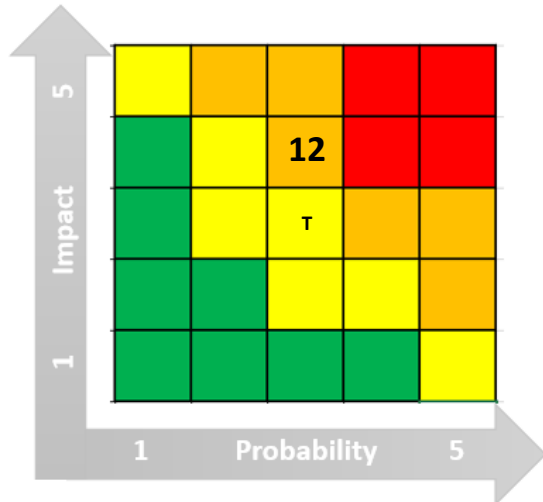


Risk Description	Risk Owner	Risk Lead
<p>Due to the unpredictability of Public Health outbreaks and incidents within our communities, coupled with extreme system pressures, there is a risk to our ability to sustain core clinical services which could negatively impact upon patient care, staff health and wellbeing &amp; NHSL reputation.</p> <p>Some examples include:</p> <ul style="list-style-type: none"> <li>Avian Influenza in community</li> <li>Measles outbreak in primary care</li> <li>Vancomycin resistant enterococci in haematology ward</li> <li>Legionella in acute setting</li> </ul>	Josephine Pravinkumar	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> <li>Completed escalation plan outlining management of incidents with particular focus on the impact of Covid and any emerging new variants.</li> <li>Ongoing staff training and development</li> <li>PH Incident Plan is being updated</li> <li>Partnership working with HSCPs; SDPHs Group and Public Health Scotland</li> </ol>		
Actions		
<ol style="list-style-type: none"> <li>Exercising of public health plans</li> <li>Early Warning indicators to be developed with PHS and UoS. To note PHS are undertaking this work at a national level rather than Board specific, although any signals would probably be look at by PHS to see if focused in particular regions of Scotland.</li> <li>Ongoing review of surveillance data at a local and national level</li> </ol>		

Risk Trend	Decrease to risk score
Change to risk score proposed by Director of Public Health to reflect additional actions being taken.	
Impact is a 4 due to the delay in recovery of all PH services since the pandemic and the health status of our population.	
Update to existing action (2).	

# Corporate Risk in Focus – Change

## 2234 - Nursing Home Beds

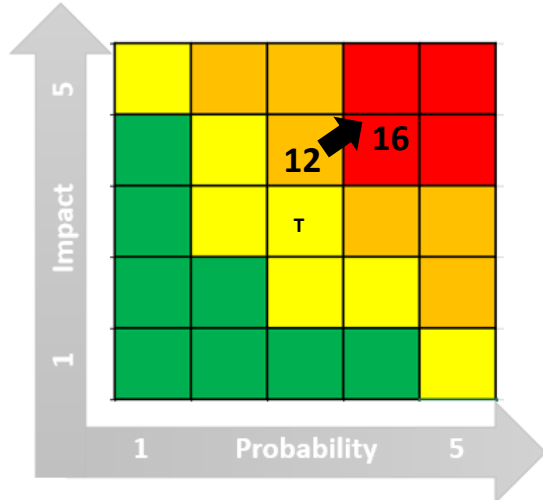


Risk Description	Risk Owner	Risk Lead
Due to continuing financial pressures and cost of living increases affecting Nursing Home costs as well as reduced workforce availability, there is a risk to the sustainability of the Nursing Home Service resulting in increased delayed discharges, fewer available beds, potential further deterioration of patients and disruption to whole patient flow.	Chief Officer, North	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> <li>Care Home Assurance Team meet monthly for whole system review.</li> <li>RAG status and detail per Care Home reported weekly to CMT.</li> <li>Executive Director for NMAHP holds oversight of quality of care within Care Homes/Nursing Homes in Lanarkshire.</li> <li>Attendance at national contingency group for care homes</li> <li>Attendance at national contingency group for care homes led by COSLA</li> </ol>		
Actions		
<ol style="list-style-type: none"> <li>New structure and TOR have been signed off and transition has commenced.</li> <li>Renewed engagement with sector to identify key requirements (started by an engagement event in June 23 to review progress to date)</li> </ol>		

Risk Trend	Update to Risk Action
	<p>Action updated: New structure and TOR have been signed off and transition has commenced. 1 further care home has notified us of intention to close which is being managed through the established process. All other mitigations remain in place and no change to risk level.</p>

# Corporate Risk in Focus – Increase

## Risk 2212: Failure to Comply with NHS Sustainability Policy, DL (2021) 38

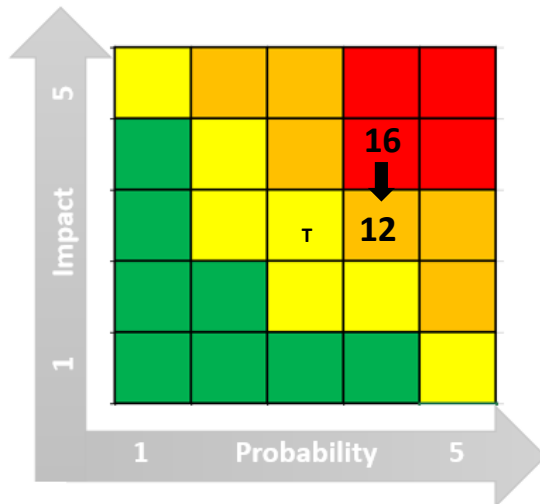


Risk Trend	Increased to Risk Score from High to Very High
Proposed Change to Score with increase from High to Very High: Capital allocation from SG was £2.2M vs the £6M bid for. Without appropriate funding investment to substantially improve the energy efficiency of our buildings as outlined within our Route map to Net Zero, we have no prospect of achieving Net Zero by 2040.	

Risk Description	Risk Owner	Risk Lead
<p>DL (2021) 38 'A Policy for NHS Scotland on the Climate Emergency and Sustainable Development' sets out the aims and targets that ensure NHS Scotland is a net zero greenhouse emitting health service by 2040 or earlier. The aims must be fully integrated across NHSL into all planning, management decisions and operational practices.</p> <p>There is a risk that capacity and financial limitations impact on NHSL's ability to sufficiently progress the agenda and meet the mandatory policy requirements. This will result in a failure to meet performance expectations, cause reputational damage to the Board and could ultimately result in NHSL not achieving net zero status by 2040.</p>	Emily Thyng Energy and Environmental Officer	Colin Lauder
Current Controls		
<ol style="list-style-type: none"> <li>NHS Lanarkshire Sustainability &amp; Climate Change Policy (2022)</li> <li>NHS Lanarkshire Sustainability &amp; Climate Change Strategy</li> <li>NHS Lanarkshire Sustainability &amp; Environment Group in place and chaired by Deputy Director Planning, Property &amp; Performance</li> <li>Regular reports to CMT and PPRC</li> <li>Completion of national reports (both statutory and non-statutory) in areas relating to the Boards GHG emissions performance, climate change risk and adaptation and biodiversity.</li> </ol>		
Actions		
<ol style="list-style-type: none"> <li>Commission net-zero route map report vis Jacobs, Draft received July 2023;</li> <li>Formation of a refreshed governance structure and membership of the Sustainability &amp; Environment Group</li> <li>Establish dedicated workstreams and identify senior leads</li> <li>Workstream objectives clearly set out and highlight reporting of progress.</li> <li>Energy efficiency grant funding sought supported by Mott MacDonald consultants through the Green Public Sector Estates Decarbonisation funding stream</li> <li>Re-investment of a proportion of savings to increase capacity, including identifying spend to save opportunities</li> <li>Maximise opportunities to secure external funding</li> </ol>		

# Corporate Risk in Focus – Decrease

## Risk 2126: Sustaining Primary Care Out of Hours Service



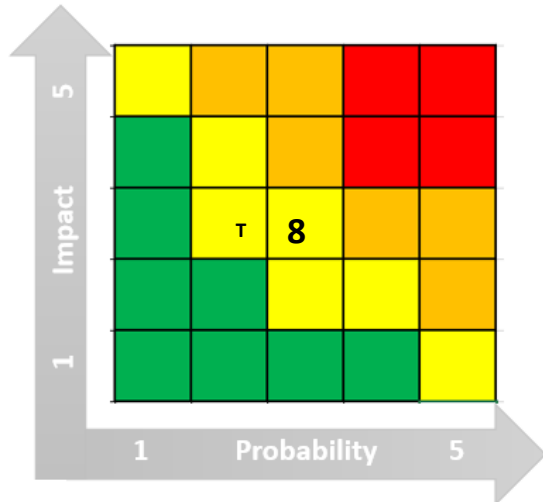
Risk Trend	Decrease to Risk Score from very High to High
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Proposed Change to Score with decreased from Very High to High: Service has enhanced their team with the addition of new recruits ahead of winter and as part of overall winter preparedness. Comms planned in respect of public messaging in relation to the right care at the right place and reminding patients (where appropriate) to have an adequate supply of prescription medication ahead of the upcoming festive holidays.

Risk Description	Risk Owner	Risk Lead
Due to insufficient supply of GPs and advanced practitioners or resultant staff mix which does not allow all clinical issues to be resolved by available staff, there is a risk that treatment to patients will be delayed within the Primary Care Out of Hours Service resulting in reduced patient care & experience and negative opinion of NHSL.	Chief Officer South HSCP	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> <li>1. Invoking 'Safety Netting' via A&amp;E as contingency arrangements</li> <li>2. National and local re-design of services, including Urgent care</li> <li>3. Improvement project plan reviewed with an outline of change reviewed by CMT and considered by Population Health, Primary Care and Community Services Governance Committee</li> </ol>		
Actions		
<ol style="list-style-type: none"> <li>1. Commence process for adopting the 3 Horizon model for transformational change to the model for the delivery of urgent care.</li> <li>2. Move towards a multidisciplinary model of care to ensure that service is not dependent on sessional GPs, with rolling recruitment of ANPs, and explorations with professional leaders of role of other professional groups (eg pharmacists)</li> <li>3. Explore and resolve broader system consequences of non medical staff providing care</li> <li>4. Ensure that patient safety is maintained by safety netting process previously agreed by CMT</li> </ol>		

# Corporate Risk in Focus – Change

594 - Prevention & Detection of Fraud, Bribery and/or Corruption



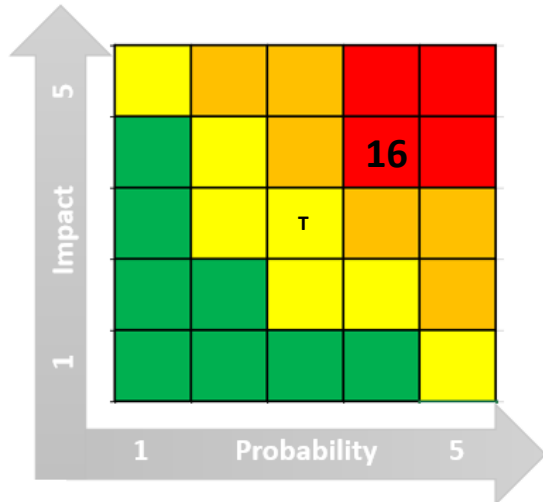
Risk Description	Risk Owner	Risk Lead
There is a risk that NHSL fails to prevent, appropriately identify, investigate and report fraud, bribery and corruption. This has the potential to adversely affect clinical care, staff, the Board's financial position, and the reputation and public perception of NHSL.	Laura Ace	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> <li>1. Participation in the National Fraud Initiative: Fraud Policy &amp; response plan, SFI's, Code of Conduct for board members and Staff, Internal Audit, Internal Control System and Scheme of Delegation (level of individual authority)</li> <li>2. Established appointments of Fraud Champion &amp; Fraud Liaison Officer</li> <li>3. Key contact for NFI, who manages, oversees, investigates and reports on all alerts</li> <li>4. Audit Committee receives regular fraud updates</li> <li>7. Annual national fraud awareness campaign</li> <li>8. On-going fraud campaign by the Fraud Liaison Officer through communications plan and specific workshops</li> <li>9. Learning from any individual case</li> <li>10. Enhanced Gifts and Hospitalities Register</li> <li>11. Procurement Workshops for High Risk Areas</li> <li>12. Enhanced checks for 'tender waivers' and single tender acceptance</li> <li>13. Increased electronic procurement that enables tamperproof audit trails</li> <li>14. Planned internal audit review of departmental procurement transactions and follow up on the implementation of the Enhanced Gifts and Hospitalities Register</li> <li>15. Annual Review with the National NHS Counter Fraud Services</li> <li>16. Covid risk profile being built-into the NHSL Fraud Register</li> <li>17. Distribution of relevant fraud updates</li> <li>18. Communication through NHSL Info briefing</li> <li>19. Internal Audit responsiveness to areas of concern identified through Directors/manager</li> </ol>		
Actions		
<ol style="list-style-type: none"> <li>1. Continuous monitoring</li> <li>2. Action plan being developed against fraud standard assessment <b>presented to Audit Committee 5/12/23</b></li> </ol>		

Risk Trend	Change to Risk Action
	Action 2 updated (highlighted in red)



# Corporate Risk in Focus – Change

2129 - Sustaining Whole System Patient Flow

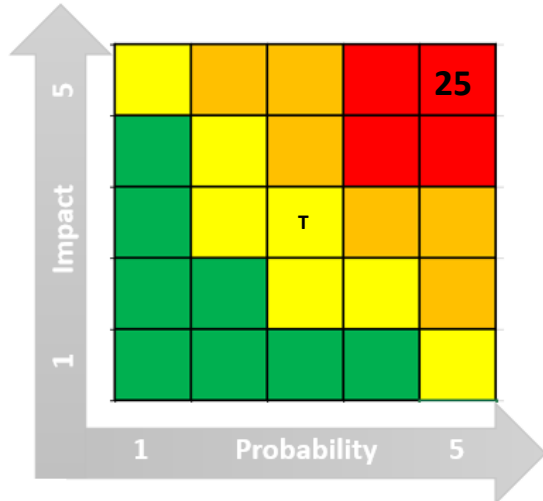


Risk Description	Risk Owner	Risk Lead
<p>There is a risk that NHSL cannot sustain whole system patient flow due to delays experienced for onwards movement of patients considered fit for transfer to care homes and care @ home as a result of continuing care home outbreaks, hospital outbreaks, health and care workforce capacity to meet the demand, or referrals being received on date of clinical readiness. This has the potential to adversely impact on delayed discharge performance, ability to meet the 'routine' and increasing bed demand for more unwell patients and the ability to prepare for recovery of services.</p>	Jann Gardner	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> <li>NHSL provides support to care homes through liaison service, including infection control/ outbreak advice &amp; support, risk assessment for onward movement of patients</li> <li>Local planned date of discharge (PDD) and national discharge without delay (DWD) programme implemented</li> <li>CMT have continuous oversight of performance, reasons for delay and consider further actions</li> <li>Continuous oversight of hospital outbreaks and infection prevention and control advise with case by case management of outbreaks</li> <li>Workforce planning with continuous monitoring of sickness/absence during surge periods</li> <li>Operation Flow is now in progress.</li> <li>Introduction of new Home Assessment/Home First Teams to support earlier discharge</li> <li><b>8. Regular PDD calls to review all delayed discharges in the system</b></li> </ol>		
Actions		
Empty space for actions		

Risk Trend	Additional Control Added
Additional Mitigating Control added (highlighted in red)	

# Corporate Risk in Focus – Change

**2197** - Ability of NHS Lanarkshire to Deliver a Balanced Budget within Periods 23/24 – 25/26

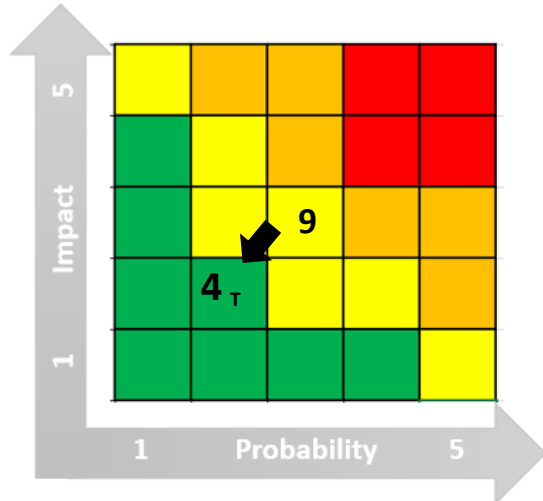


Risk Description	Risk Owner	Risk Lead
There is a significant risk that NHSL will be unable to identify and release the savings needed, on current income and expenditure projections, to meet the Scottish Governments requirement to deliver a balanced budget for the period of 2023/24 – 2025/26.	Laura Ace	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> <li>1. Maximise financial management opportunities in the short-term</li> <li>2. High thresholds and strict criteria for any additional spend</li> <li>3. Intelligence gathering and scenario planning to ensure forecasts as reliable as possible</li> <li>4. Regular horizon scanning for opportunities and threats</li> <li>5. Enhanced Sustainability &amp; Value Programme covering all areas of the organisations operations and spend and linked firmly to the Boards overall healthcare strategy</li> <li>6. Participation in National Savings Groups</li> <li>7. Agreement with SG regarding brokerage repayment.</li> </ol>		
Actions		
<ol style="list-style-type: none"> <li>1. Continuous review of financial quarter position</li> <li>2. Accelerate activity around sustainability and savings plans when is reasonably appropriate</li> <li>3. Reform group set up to look at how to shape service within budget for 24/25</li> <li>4. Communications and actions to be agreed to slow down spend in Q4 2023/24</li> <li>5. Review of all slippage in order to use it to reduce forecast deficit</li> </ol>		

Risk Trend	Change to Risk Actions
New actions added for this risk (highlighted in red)	

# Corporate Risk in Focus – Decrease

2221 - Non-Compliance with Off-Framework  
DL(2023)5



Risk Description	Risk Owner	Risk Lead
If there continues to be a heavy reliance on off-framework agency use due to lack of availability of substantive resource in areas such as Emergency Department, Peri-operative and Kylepark, there is a risk of continuous non-compliance with DL(2023)5 which could result in additional unaccounted financial exposure for the board and scrutiny from SG.	Eddie Docherty	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> <li>Escalation framework in place requiring sign off from an exec director to grant use of off-framework agency workers for OOH</li> <li>Agency touchpoint meetings arranged 3 times per week.</li> <li>Site escalations for NFA must be approved by the Chief/ Deputy Chief Nurse prior to submission to the Divisional Director or Nurse Director.</li> </ol>		
Actions		
<ol style="list-style-type: none"> <li>The planned exit strategy is to remove all Non-Framework Agency use by the end of July. Sites are developing reduction trajectories for each ward/dept.</li> <li>Ongoing negotiations with agencies to retain a tariff and governance which is in line with framework until current tender is complete.</li> <li>Negotiations for block booking Framework Agency staff is ongoing.</li> <li>The Acute Site senior nursing teams are reviewing rosters to maximise substantive resources and ensure escalation to Staffbank is at least 4 weeks prior to the go-live date of the roster.</li> </ol>		

Risk Trend	Decrease to Risk Score
Proposed decrease to risk score bringing risk into line with target set. NHS Lanarkshire is now compliant with DL(2023)5 however given the challenges in the system we will continue to monitor this as a potential risk.	

# Very High Risks – Summary

There are 11 very high risks managed within the Acute Division:

Ref	Risk Title	Nov	Dec	Trend	Target Score	Commentary
2042	Unscheduled Care	25	25	—	4	19/12/23 - reviewed by JK, no change. review date updated. FA
2229	Acute Finance 2023/2024	20	20	—	3	04/01/2024 - Risk reviewed by Michael McLuskey. Description changed from "is highly unlikely to" to "will not". review date
2227	Treatment Time Guarantee	20	20	—	2	12/01/2024 - risk reviewed by RC. Risk remains. Review date updated FA
2207	Emergency Department Junior Medical Staff	20	20	—	4	7/12/23 - Risk reviewed and no update at present time.
2236	Radiology reporting workload	16	16	—	3	22/12/23 - risk reviewed by EC - risk remains
2193	Stroke/Care of the Elderly additional beds AHP risk	20	20	—	6	15/12/23 - Risk reviewed - The AHP entry on the risk register remains unchanged. Although there are plans to reduce the bed no.s there is currently no confirmation of the reduction no. or the date this will occur. Until then, the risk remains the same.
2172	Ophthalmology glaucoma service	16	16	—	6	20/12/23 - risk reviewed by JM. No changes at present. Hopefully by end of January 2024 the risk level can be reduced. Review date updated.
2151	Sustaining a Safe Workforce	25	25	—	6	01/11/2023 Risk Reviewed, mitigating controls and actions updated.
1954	Demand Exceeding the Capacity within University	25	25	—	6	01/12/2023 Risk Review, Description, Mitigating Controls and Actions updated.
1848	Staff Resilience	16	16	—	2	20th December 2023 - risk reviewed by Ruth Thompson. Control 2 updated. Previously "2. Recruitment of Trainee Assistant Practitioners (band 4) to support the stabilisation of the nursing workforce ongoing. Shortlisting stage as at 7th November 2023." Review date updated.
2162	Boarding of patients outwith specialty	15	20	/	8	1/12/23 - Risk reviewed and upgraded to Very High: Boarder numbers are very high with concerns about patient care as a result of medical staffing numbers to cover these beds. Risk upgraded.

# Very High Risks – Summary

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There is 1 very high risk managed within MRP:

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Ref	Risk Title	Nov	Dec	Trend	Target Score	Commentary
2177	<b>MRP Workforce Recruitment</b>	16	16	—	9	12/1/24 - Risk updated from J Eve, MRP: Ward Group process mapping event held 12th Dec to review all staff activity and input over a 24 hour period. This also highlighted activity that only occurs Monday- Friday due to current service provision. A follow up to this is now planned for the nursing team only on the 23rd Feb. This workshop will aim to look at the core team in the ward and how a ward model can be developed based on optimal pathways and input from the MDT. Gateway one activity complete with output report to be presented at PT and PB.

# Very High Risks – Summary

There are 5 very high risks for Monklands Business Continuity:

Ref	Risk Title	Nov	Dec	Trend	Target Score	Commentary
2233	<b>MTHW Heating Pipework leaking</b>	20	20	—	6	28/11/23 - Note added to Master Risk Register Notes - NHSL have identified that the Pressurisation Unit is topping the MTHW Heating system up at an increased rate (1L every 45 seconds, from previous rate of 1L every 2 minutes). Further investigations to take place on 01/12/23. Next review date 31/1/24
2231	<b>Fire Compartmentation - Damaged Cavity Barriers within the Renal Unit Ceiling Void</b>	20	20	—	6	28/11/23 - Note added to Master Risk Register Notes - FSW10 Design was reviewed and approved at a meeting on 10/10/23. GRAHAM are currently progressing the market testing for these works. Next review date 31/1/24
1773	<b>Deterioration/failure of cast iron pipes</b>	16	16	—	9	28/11/23 - Note added to Master Risk Register Notes - GRAHAM are currently reviewing alternative proposals to avoid impact on bed numbers. GRAHAM to prioritise Ward 16 as the ward is currently fully decanted. Next review date 31/1/24
2253	<b>Steam Boilers</b>	16	16	—	8	28/11/23 This risk has been transferred to Datix from the AECOM Risk Register as directed by Colin Lauder. Notes from the spreadsheet. NHSL Estates are arranging for the replacement/repair of the failed Steam Boilers. Next review dates 31/1/24
1772	<b>Deterioration/Failure of existing below ground drainage</b>	16	16	—	9	28/11/23 - Note added to Master Risk Register Notes - GRAHAM are developing the Stage 1A Design. A HAI-SCRIBE has been arranged for 29/11/23 for initial CCTV Surveys within the hospital. Next review date 31/1/24

# Very High Risks – Summary Cont.

There are 4 very high risks for the Primary Care Improvement Plan (New GMS Contract) :

Ref	Risk Title	Nov	Dec	Trend	Target Score	Commentary
1995	Practice Sustainability Impact on PCIP (GMS2018-002 )	20	20	—	12	Risk reviewed at GMS EOG
2000	Accommodation (GMS2018-008)	16	16	—	12	Risk reviewed at GMS EOG
1997	PCIP Workforce (GMS2018-005)	16	16	—	12	Risk reviewed at GMS EOG
2048	Delivery of GMS2018 Contract - Pharmacotherapy Services	16	16	—	9	Risk reviewed at GMS EOG

There are two very high risks for South HSCP: (Due to timing of report preparation for December 2023 Board, risk 2022 was not at that point reported as Very High)

Ref	Risk Title	Nov	Dec	Trend	Target Score	Commentary
2029	ICST workforce	16	16	—	12	14/12/23 - Updates sought on risk, await response (Last updated Aug 2023)
2022	Management of children awaiting dental care	20	20	—	9	14/12/23 - Update sought on risk or mitigation controls, await response. Last Update: 23/11/23 - Discussed at recent risk register meeting, changed to Very High as NHS Lanarkshire has the highest increase in waiting times since pre-pandemic.

# Very High Risks – Summary Cont.

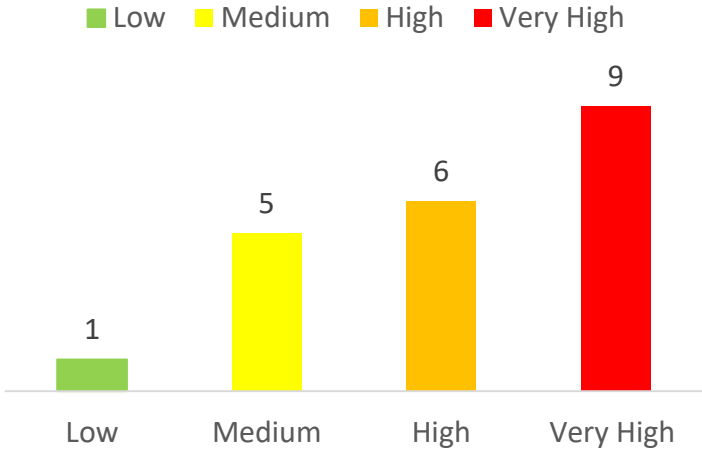
There are 3 very high risks for North HSCP (Mental Health)

Ref	Risk Title	Nov	Dec	Trend	Target Score	Commentary
2226	<b>Ventilation Risk (Wards 19/20 UHH)</b>	20	20		2	04/01/2024 - Email sent to Gillian for update on Risk. To remain very high on the register as the winter will bring other challenges re control of infection etc. Feedback from NHS assure however advice they offered had been explored. Decided to put utilisation of air con on hold as implementing these would bring other challenges and risks, such as ligature, also removing windows in order to use extraction hoses. Also the warm weather subsided. Next review date 31/1/24
1542	<b>General Adult Psychiatry Medical Vacancies</b>	25	25		4	04/01/2024 - Email to Adam Brodie for update on the Risk. CD
2245	<b>Medical Vacancies across North HSCP hosted services</b>	20	20		3	28/11/2023 updated actions by LM 23/11/2023 meeting convened by exec MD with head of HR, divisional MDs and DME to discuss this and other medical WF issues panLan. potential for pan lan group discussed, outcome awaited. advertising 8/2 contacts discussed - outcome awaited. TOR created and first meeting arranged for 24/11/2023 North HSCP medical workforce oversight group. Work to be commissioned on the model of GAP in NHS L (meeting to discuss with SG MH advisor Dr A Cook arranged for 1/12/2023) Next review date 31/1/24



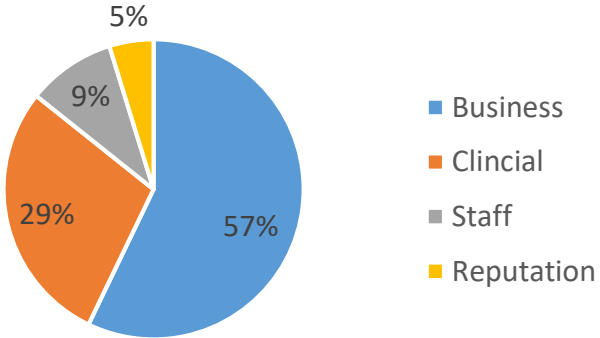
# Corporate Risk Trends

Risk Level



Of the 21 Corporate Risks reported, 9 of the reported risks are very high (the same as the last reporting period) 6 are high (the same as the last reporting period), 5 are medium (one less than the previous reporting period) and one is low (one more than the last reporting period), in terms of risk level.

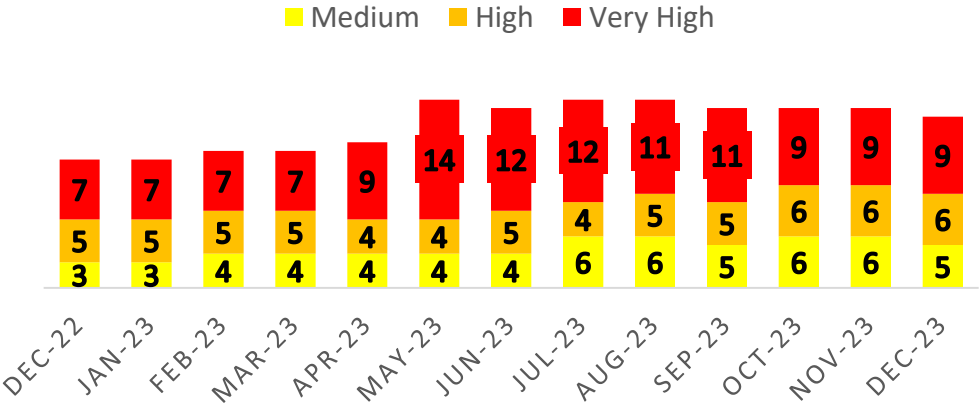
Risk Type



Business risk is the largest risk type within the corporate risk register with 12 out of 21 being classed within that risk type. 6 risks are classed as clinical and 2 as staff and 1 as reputation.

# Corporate Risk Trends

## CORPORATE RISK PROFILE



NHSL has changed their corporate risk profile in the past year, reporting an increase of 6 risks from December 2022 and December 2023.

The very high risks have increased by 2, the high risks have increased by one and the medium risks seen an increase of 2.

December 2023 also reported one risk reduced to low risk level and now in alignment with target