

NHS Lanarkshire

Corporate Risk Register - Summary Overview

Reporting Period: June 2024 – August 2024

Corporate Risks Dashboard (August 2024)

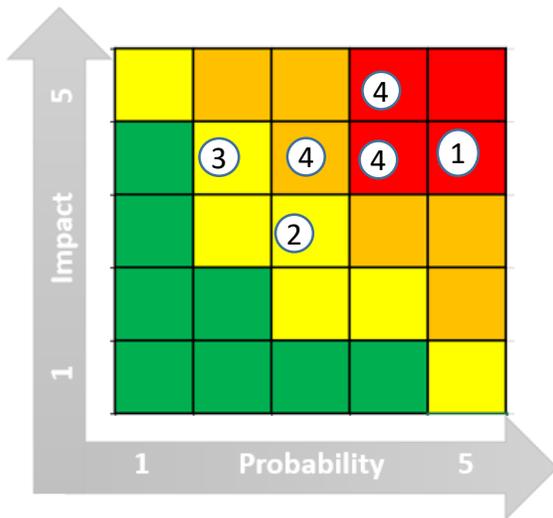
Executive Summary

- All risks on the Corporate Risk Register have an update requested monthly.
- Risk workshops with both CMT and Board members have been scheduled for September & October.
- Inphase is now live and work is ongoing to ensure that all risks are accessible for risk owners and leads.
- Work is ongoing to capture a risk highlighting clinical risk of very long waits.
- Review of current Financial risk is underway with DoF with the aim of separating the risk into a short term and long term financial risk.

Risk Register	Number of Risks
Corporate	18

Risk Movement Since Last Report							
No Change	Increase	Decrease	New	Closed	Escalated	De-escalated	Change
11	1	2	-	1	-	-	4

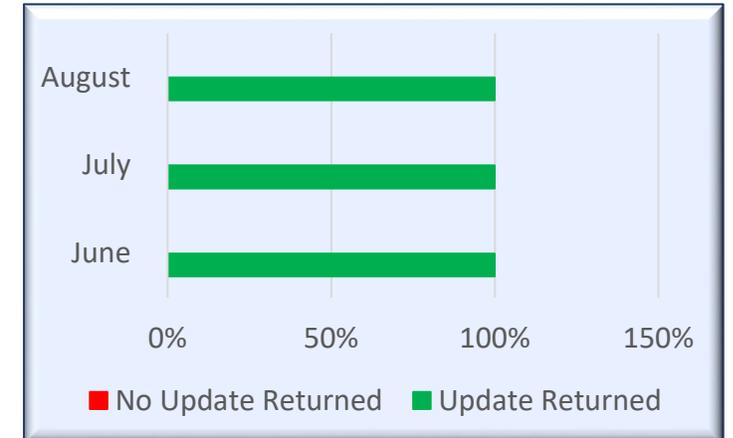
Corporate Risk Heat Map



Highest Scoring Corporate Risk

	Risk	Score	Trend
2197	Ability of NHS Lanarkshire to Deliver a Balanced Budget within Periods 24-25 and 26-27	20	↓
2212	Failure to Comply with NHS Sustainability Policy, DL (2021) 38	20	↑

Corporate Risks Updated

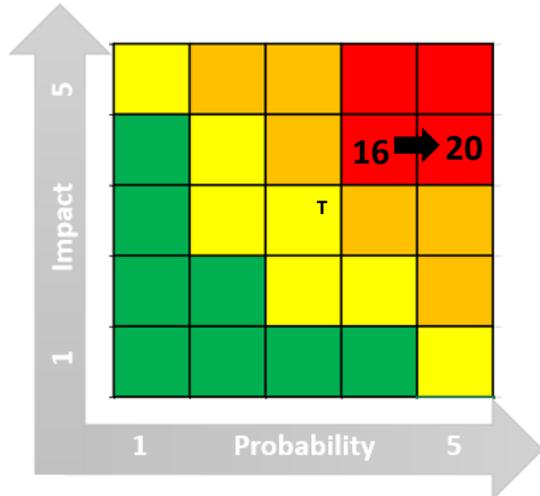


Corporate Risk Reports Discussed at CMT:

Dates:		
3 rd June 2024	1 st July 2024	5 th August 2024

Corporate Risk in Focus – 2212 - Increase

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



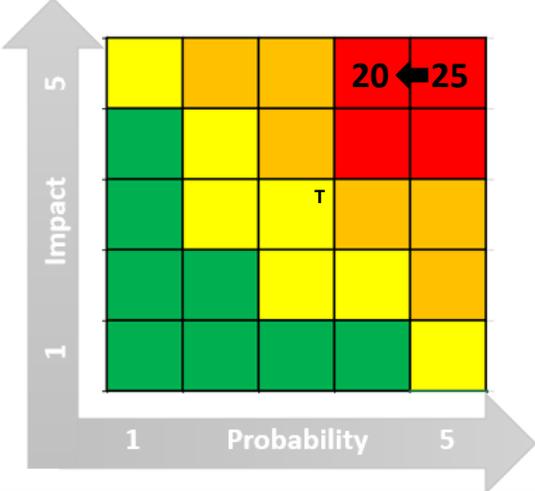
Risk Trend **Increasing**

No grant funding available at this time (July 24) to support next years identified energy efficiency capital investment priorities.

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>	Colin Lauder	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> 1. NHS Lanarkshire Sustainability & Climate Change Strategy 2. NHS Lanarkshire Sustainability & Environment Group re constituted, 6 workstreams established and leads identified. Group is chaired by Deputy Director Planning, Property & Performance who has lead responsibility for S&E 3. Routemap to Net Zero produced 4. Annual objective setting process embedded for deliverables 5. Production and publication of Annual Report 6. Submission of Public Sector Duties report annually (November) 		
Actions		
<ol style="list-style-type: none"> 1. Implementation of priorities identified as part of the Environmental Sustainability Strategy via Workstreams 2. £2.2M Energy efficiency grant funding in place for work to be carried out through 24/25. Contractor commissioned (Vital Energy) and developing the programme. Bid for next tranch of grant funding under development to be submitted through the Green Public Sector Estates De-carbonisation funding stream by July 24. 3. Re-investment of a proportion of savings to increase energy management capacity, where this can demonstrate sufficient spend to save opportunities – funding approved and job description under development. 4. Focus on identifying and implementing energy efficiency measures 5. Sustainability investment requirements included as part of the developing property IA 		

Corporate Risk in Focus – 2197 - Decrease

2197: Ability of NHS Lanarkshire to Deliver a Balanced Budget within Periods 2024/25 – 2026/27

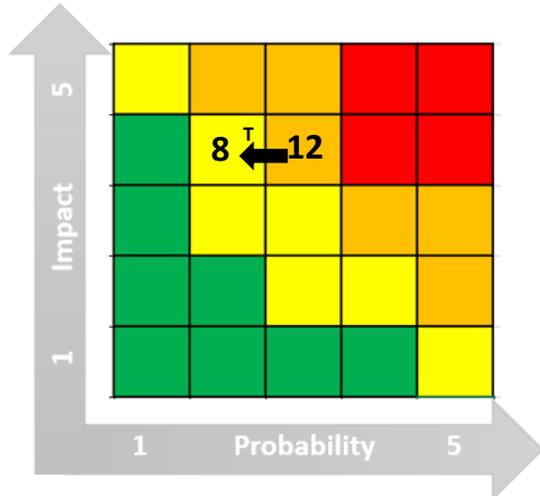


Risk Trend	Decrease in Score
Risk score decreased with mitigating controls update.	

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 2024/25 – 2026/27.	Michael Breen	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> 1. Maximise financial management and budget saving opportunities as short term bridging actions 2. Robust and regular financial reporting across all NHS Lanarkshire budgets 3. Intelligence gathering and scenario planning to ensure forecasts are as reliable as possible 4. Regular horizon scanning for opportunities and threats 5. 2024-25 Sustainability and Value Plan (c.£76m) identified by Executive Directors 6. Transformation and Reform strategies and grip and control actions have been identified to bring the overall system into financial balance during 2024-25. 7. Participation in National Savings Groups and internal review of SG Financial Improvement Group data 8. Enhanced Reporting has been developed to monitor to progress of the 2024-25 Sustainability and Value Plan 9. Finance and Resource Committee has been established. 		
Actions		
<ol style="list-style-type: none"> 1. Monthly Finance Reporting – Internal and External (SG) 2. CRES Savings Plans being further developed (including risk assessed) for implementation by Executive Directors 3. Maximise SG opportunities for Financial flexibility 4. Transformation and Reform initiatives being progressed at pace e.g. E-Triage and Virtual Bed additional capacity 		

Corporate Risk in Focus – 2234 – Decrease

2234: Nursing Home Beds

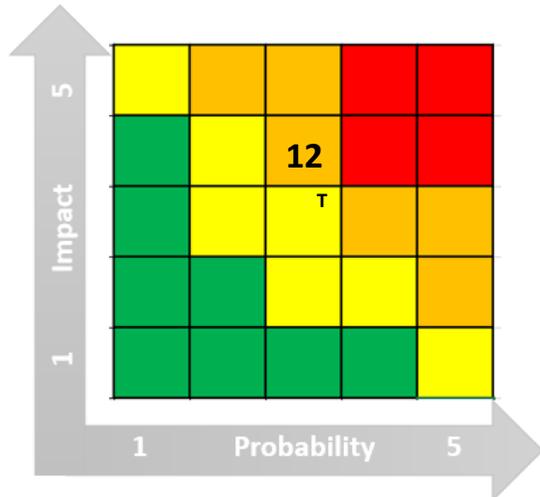


Risk Trend	Decreasing
<p>Risk score reduced to 8 (Target) based on the fact that the National Care Home Contract Rate has been agreed for 24/25 and we've generally seen much greater stability in the sector over the last few months. While the risk may go back up at the end of the year as we get closer to the uncertainty of the 25/26 NCHC negotiations, but I don't think is a high risk any more at present.</p>	

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"> Care Home Assurance Team meet monthly for whole system review. RAG status and detail per Care Home reported weekly to CMT. Executive Director for NMAHP holds oversight of quality of care within Care Homes/Nursing Homes in Lanarkshire. Attendance at national contingency group for care homes New Care Home Assurance Support Board (CHASB) now in place along with Assurance and Governance and Healthcare Framework Implementation subgroups National Care Home Contract rates agreed for 2024/25 Funding confirmed for the Care Home Support team for 2024/25 		
Actions		
<ol style="list-style-type: none"> Continued engagement with sector to identify areas of priority and collaboration New oversight structure now implemented following engagement events in July 2023 		

Corporate Risk in Focus – 2124 - Closed

2124: Sustaining a Safe Workplace

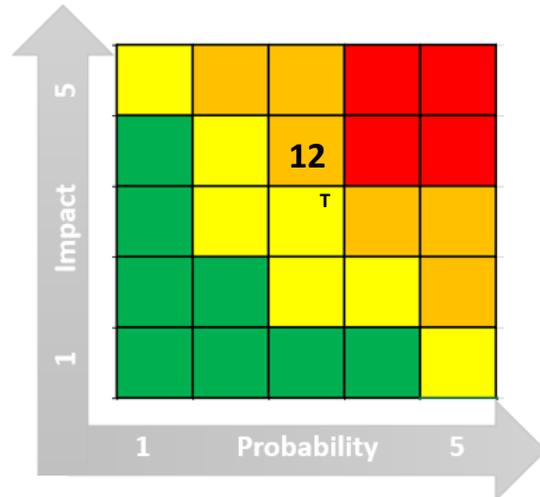


Risk Description	Risk Owner	Risk Lead
There is a risk that NHSL will not be able to sustain the necessary safe workforce to meet the changing priorities resulting from the pandemic response and service demands moving into recovery. This has the potential to adversely impact on patients, staff, continuity of services and ability to comply with the forthcoming Health & Care (Staffing) (Scotland) Bill.	Jacqui Jones	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> 1. Workload and workforce planning using national tools on a cyclical basis. 2. GP Sustainability Group in place and active 3. Innovative Local recruitment such as using data to drive targeted recruitment and advertising posts on various social media platforms 4. National and International Recruitment 5. Responsive Deployment and redeployment of staff 6. Wellbeing initiatives supporting staff and supporting attendance 7. Monitoring of attrition and sickness/absence 8. Negotiations with local universities to increase intake of NMAHP per year 9. New recruitment website and resources launched to promote NHSL as employer of choice. 10. Retire & Return Policy to support staff, services and succession planning 11. Process for monitoring compliance with mandatory training introduced to act as a key measurement for safe working 12. Use of supplementary staffing to manage short term resource gaps via overtime, excess, bank etc. 		
Actions		
Shown on next page.		

Risk Trend	Risk Closed
Update from Director of HR:	
I think that this risk can now be closed as it is no longer live. We are implementing the Health & Care (staffing) (Scotland) Bill along with eRostering and as yet this has not indicated that our staffing levels are unsafe. I would conclude that this risk should be closed.	

Corporate Risk in Focus – 2124 Cont.../ - Closed

2124: Sustaining a Safe Workplace

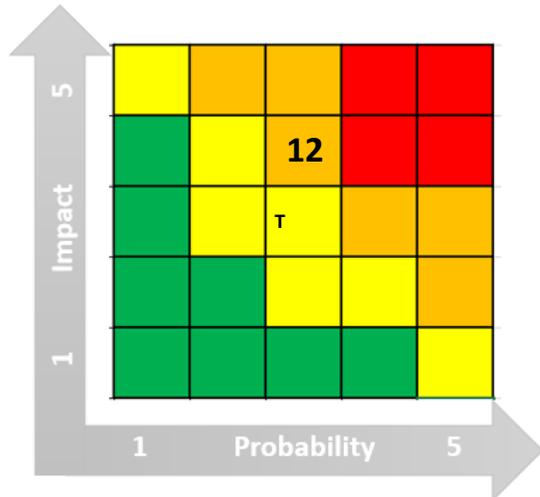


Risk Description	Risk Owner	Risk Lead
There is a risk that NHSL will not be able to sustain the necessary safe workforce to meet the changing priorities resulting from the pandemic response and service demands moving into recovery. This has the potential to adversely impact on patients, staff, continuity of services and ability to comply with the forthcoming Health & Care (Staffing) (Scotland) Bill.	Jacqui Jones	Jann Gardner
Current Controls		
Shown on previous page.		
Actions		
<ol style="list-style-type: none"> 1 An Acute Scrutiny Panel chaired by the Chief Executive meets monthly to review a range of Key Performance Indicators (KPIs) from Triangulation dashboard for the Acute Division, including a focus on actions to reduce sickness absence. 2 Meetings have been set up and taken place with the Site Teams for each of the Acute Hospitals, chaired by the Director of HR and using the appreciative inquiry model as an approach to a focus on sickness absence. These meetings have led to a better understanding of the issues, both from a service perspective and an HR perspective, to managing sickness absence. Actions are being taken forward to address these issues. 3 A deep dive into a sample of sickness absences that are over 60 and 90 days across Acute sites has been undertaken and a report produced. The report revealed issues of non-compliance with Once for Scotland Workforce Policy, including a lack of consistency in referring staff to Occupational Health when a sickness absence trigger has been breached and improvements that HR need to make. This was discussed at the Acute Directorate Management Team and will be presented to the Corporate Management Team for discussing and agreement on actions. 4 Head of HR – Employee Relations to lead a Short–Life Working Group focussing on addressing the issues raised through the deep dive into long term Sickness Absence. 5 Plans are in place to undertake a deep dive into short term sickness absence. 6 Further training and workshops will be delivered for line managers. 7 Employee Relations team to deliver bespoke onsite Absence Management training sessions across Acute sites, in addition to those that are already available via MS Teams. 		

Risk Trend	Risk Closed
Update from Director of HR:	
<p>I think that this risk can now be closed as it is no longer live. We are implementing the Health & Care (staffing) (Scotland) Bill along with eRostering and as yet this has not indicated that our staffing levels are unsafe. I would conclude that this risk should be closed.</p>	

Corporate Risk in Focus – 2155 - Change

2155: Impact of Unpredictable Public Health Outbreaks on Current Services

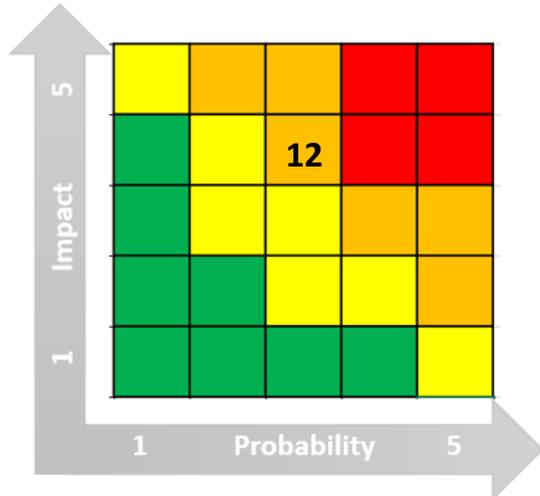


Risk Trend
No change to risk rating. Added actions and controls. Removed action re. Early Warning indicators

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 service delivery which could negatively impact upon patient care, staff health and wellbeing & NHSL reputation.</p> <p>Some examples include: Avian Influenza in community, Measles outbreak in primary care, Mpox, Vancomycin resistant enterococci in haematology ward, Legionella in acute setting</p>	Josephine Pravinkumar	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> Completed escalation plan outlining management of incidents with particular focus on the impact of Covid and any emerging new variants. Ongoing staff training and development PH Incident Plan is being updated Partnership working with HSCPs; SDPHs Group and Public Health Scotland Measles action plan to increase MMR uptake and preparedness across whole system (instead of primary care & acute). National Pertussis IMT now meeting monthly reduced from weekly, due to slow down in case numbers and local action plan being developed. Avian Influenza/wider respiratory surveillance – preparedness for Bovine Avian Influenza H5N1 (cases confined to USA) PHS contingency meetings with boards participating Following declaration of Mpox as a Public Health Emergency of International Concern on 16 August, PHS have stood up Mpox IMT, and NHS LN have established group to review pathways and preparedness 		
Actions		
<ol style="list-style-type: none"> Exercising of public health plans Ongoing review of surveillance data at a local and national level. 		

Corporate Risk in Focus – 1703 - Change

1703: Safe and Effective Decontamination of Casualties Exposed to Chemical, Biological or Radiological Substances.

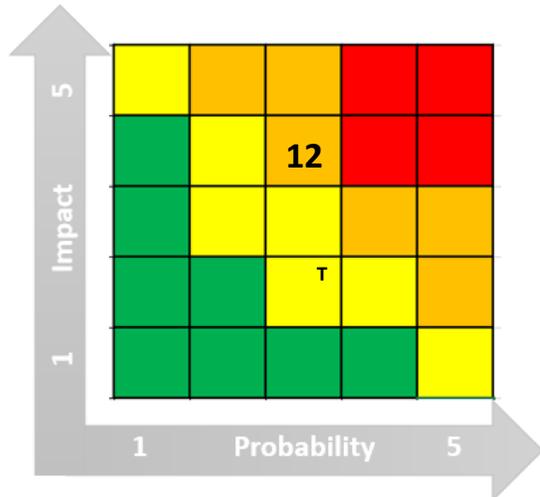


Risk Trend	Change
No change to risk rating but additional control and action added.	

Risk Description	Risk Owner	Risk Lead
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.	Josephine Pravinkumar	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> 1. Scottish Government Strategic Resilience Direction / Guidance 2. Designated Executive Lead 3. NHSL Resilience Committee 4. Local Business Continuity Plans 5. Local Emergency Response Plan 6. Gap Analysis undertaken to set out action plan(s) and solutions 7. Seek national support for these low frequency high impact potential situations 8. Major Incident Plan has dedicated section on 'Deliberate Release of Chemical, Biological or Radioactive Materials' with guiding principles 9. Development of this section within the Major Incident Plan on Decontamination of Persons at Hospital Sites, noting there is no specific national guidelines 10. Planned risk based approach is being considered at hospital sites in consultation with relevant site staff to build capability and capacity should this low frequency high impact risk situation occur. 11. Participation in National Workshop to progress Powered Respirator Protective Suits (PRPS) training (August 2021) 12. Decontamination procedures being tested nationally as part of the overall COP26 preparations 13. Aide memoir document has been approved with minor updates for the final draft 		
Actions		
<ol style="list-style-type: none"> 1. Resilience Team to undertake and evaluation of site preparedness and training needs 2. Modular approach to training is broadly welcomed. Now agreed current Decontamination staff/leads within acute sites will be targeted as a pilot before full roll out/finalisation. 		

Corporate Risk in Focus – 2039 - Change

2039: Staff **Sickness** Absence

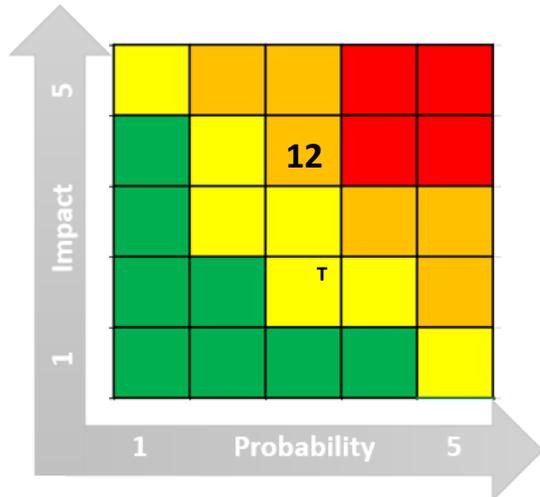


Risk Trend	
Update from Director of HR:	
Change to risk description, mitigating controls and actions.	

Risk Description	Risk Owner	Risk Lead
Sustained levels of high sickness absence rates will impact on service capacity, productivity, performance and the financial position of NHS Lanarkshire through the requirement to backfill posts with higher cost agency staff and bank staff. There will also be an impact on the wellbeing of staff who have to maintain service provision.	Jacqui Jones	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> Compliance with NHSS Attendance Policy. Monthly staff absence data provided to Service Heads highlighting areas of concern. Open access to HR advice via "Service Now". HR "Buzz Training" sessions on Attendance Policy Implementation and Work/Life balance policies. EASY (Early Access to Support for You) service for all staff to expedite access to supportive wellbeing services and signposting. OD 1-2-1 coaching support for Crucial Conversations & Wellbeing Issues. Occupational Health monthly audit to ensure staff LTA are referred for support. Range of staff support services locally and nationally – SALUS, spiritual care, staff physiotherapy, psychological services, PROMIS Access to Your Health Matters webpage for all supportive services available to staff. A reduction in, and the management of sickness absence has been and will continue to be one of the issues considered through the Triangulation of Workforce data meetings with Site Directors and teams. Deep dive into sample of 60 day and 90 day sickness absences will be reported to CMT in July. 		
Actions		
Mitigating actions included in next slide.		

Corporate Risk in Focus – 2039 - Change

2039: Staff **Sickness** Absence

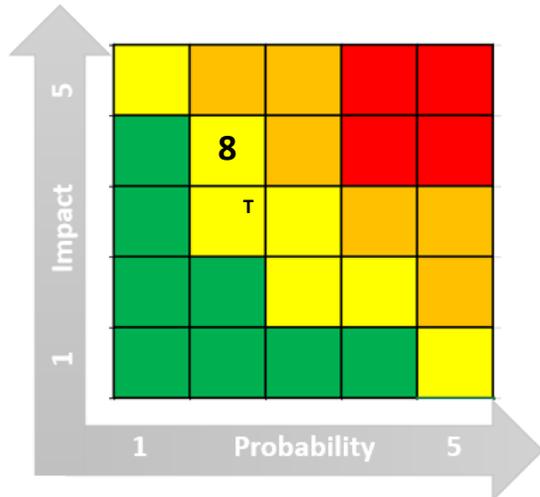


Risk Description	Risk Owner	Risk Lead
Sustained levels of high sickness absence rates will impact on service capacity, productivity, performance and the financial position of NHS Lanarkshire through the requirement to backfill posts with higher cost agency staff and bank staff. There will also be an impact on the wellbeing of staff who have to maintain service provision.	Jacqui Jones	Jann Gardner
Current Controls		
Actions		
<ol style="list-style-type: none"> 1. Key monitoring data or assurance regarding policy compliance and reporting has been developed and is being monitored. 2. Long term sickness absence profile is in place across job families across the organisation and is reported to line management and discussed at DMT meetings. 3. Monitor and report on the uptake of HR support and training programmes 4. Deep dive into sample of 50 long term sickness absence cases, over 60 days and over 90 days. Findings reported to CMT and Staff Governance Committee. Action plan being developed to improve areas of concern. 5. Exercise undertaken to produce data linking to SIDM and staff postcodes, Age, sex and pay grade. Data produced evidencing correlation to other factors plus analysis of the 3.5 years of sickness absence data. Presented to EDG and Non Executive Directors. 6. Governance being put in place to manage sickness absence as a project along with action plans to improve the management of sickness absence. 7. Ongoing work to support recruitment and retention, weekly pay for bank workers, exit questionnaires, workforce optimisation group agenda etc. 		

Risk Trend
Update from Director of HR: Change to risk description, mitigating controls and actions.

Corporate Risk in Focus 2230 – Change

2230: UHM Fire Safety Waste Receptacles



Risk Trend	Change
Additional info with timescales added to Actions - Final designs and prices are underway and will be concluded during this financial year with potential that work can commence at the end of the financial year.	

Risk Description	Risk Owner	Risk Lead
Fire testing of waste receptacles retained in circulation areas and lift lobbies has identified fire retardancies and fire containment issues. Bins do not have a minimum 30 minute fire retardancy or fire containment.	Colin Lauder	Jann Gardner
Current Controls		
<ol style="list-style-type: none"> All empty containers removed from public areas. All bins removed overnight from circulation areas and lift lobbies. Segregation and separation of linen cages and cardboard storage to areas away from bins. Issue escalated to national fire safety advisor. 		
Actions		
<ol style="list-style-type: none"> PSSD have escalated this risk to the Scottish Facilities Management Advisory Group sharing the videos generated by NHS Lanarkshire due to potential national risk implications in other hospitals and Boards Work is underway between PSSD and site clinical team to identify potential spaces to create fire rated areas if possible as part of MKBC program. Options have been identified and are now being developed into detailed proposals by the MKBC Project Group. Final designs and prices are underway and will be concluded during this financial year with potential that work can commence at the end of the financial year 		

Detail of Risk Movement:

Risk		Score	Trend	Target Score	Commentary
2212	Failure to Comply with NHS Sustainability Policy DL (2021) 38	20	Increase	6	No grant funding available at this time (July 24) to support next years identified energy efficiency capital investment priorities.
2197	Ability of NHS Lanarkshire to Deliver a Balanced Budget within Periods 2024/25 – 2026/27	20	Decrease	9	Risk score decreased with mitigating controls update.
2234	Nursing Home Beds	8	Decrease	8	Risk score reduced to 8 (Target) based on the fact that the National Care Home Contract Rate has been agreed for 24/25 and we've generally seen much greater stability in the sector over the last few months. While the risk may go back up at the end of the year as we get closer to the uncertainty of the 25/26 NCHC negotiations, but I don't think is a high risk any more at present.
2124	Sustaining a Safe Workplace	12	Closed	9	This risk can now be closed as it is no longer live. We are implementing the Health & Care (staffing) (Scotland) Bill along with eRostering and as yet this has not indicated that our staffing levels are unsafe. I would conclude that this risk should be closed.
2155	Impact of Unpredictable Public Health Outbreaks on Current Services	12	Change	9	Mpox has been added to the risk descriptor and an additional current control added. No change to score at this review.
1703	Safe and Effective Decontamination of Casualties Exposed to Chemical, Biological or Radiological Substances.	12	Change	6	No change to risk rating but additional control and action added.
2039	Staff Sickness Absence	12	Change	6	Change to risk description, mitigating controls and actions.
2230	UHM Fire Safety Waste Receptacles	8	Change	6	Additional info with timescales added to Actions.

Governance Committee Risks – Summary

There is 1 corporate risk reported to Audit & Risk Committee:

Ref	Risk Title	June	July	Aug	Risk Trend	Target Score	Commentary
594	Prevention & Detection of Fraud, Bribery and/or Corruption	8	8	8	—	6	Risk reviewed: no change made to risk in Aug.

Governance Committee Risks – Summary

There are 2 corporate risks reported to Healthcare Governance Committee:

Ref	Risk Title	June	July	Aug	Risk Trend	Target Score	Commentary
2135	Heightened Cyber Threat	16	16	16	—	6	Risk reviewed by D Wilson, no change to risk currently. Estimated completion date for work regarding the separation of this risk is end of August.
1710	Public Protection	9	9	9	—	9	Risk reviewed: no change made to risk in August

There is 1 corporate risks reported to Staff Governance:

Ref	Risk Title	June	July	Aug	Risk Trend	Target Score	Commentary
2039	Staff Sickness Absence	12	12	12	—	6	Risk reviewed, no change in August.

Governance Committee Risks – Summary

There are 6 corporate risks reported to PHPCC:

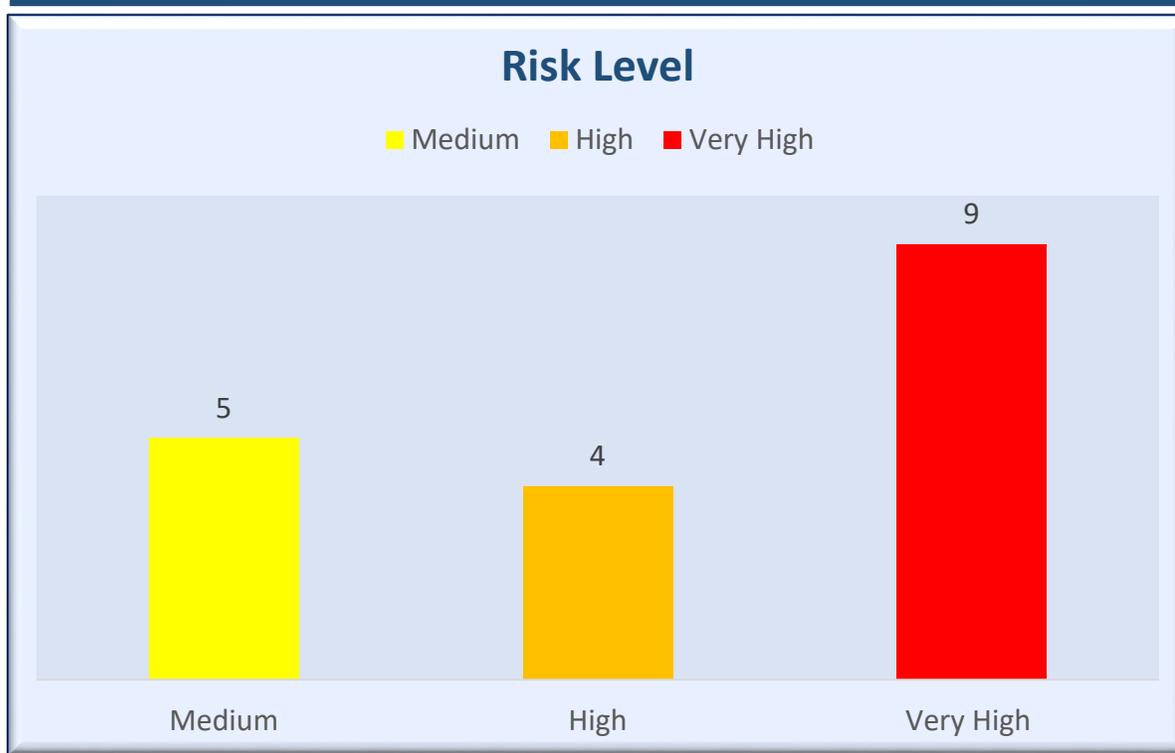
Ref	Risk Title	June	July	Aug	Risk Trend	Target Score	Commentary
2234	Nursing Home Beds	8	8	8	—	6	The National Care Home Contract has been agreed for the year, we have had no closures and are not aware of any homes that have notified us that they are about to drop however, an in-depth review will take place later in the year as the National Care Home Contract is central to this – if we don't get national agreement then the stability of the sector as a whole will be massively impacted.
2155	Impact of Unpredictable Public Health Outbreaks on Current Services	12	12	12	—	6	No change to score. Update to Pertussis IMT (reducing frequency. Mpox IMT stood up and local group established for preparedness.
1703	Safe and Effective Decontamination of Casualties Exposed to Chemical, Biological or Radiological Substances.	12	12	12	—	4	Risk reviewed with no change in August.
2150	Ability to maintain General Medical Service provision	16	16	16	—	12	Risk reviewed with no change in August.
2126	Sustaining Primary Care Out of Hours Service	12	12	12	—	9	Risk reviewed with no change in August.
2129	Sustaining Whole System Patient Flow	16	16	16	—	9	Risk reviewed with no change in August.

Governance Committee Risks – Summary

There are 8 corporate risks reported to PPRC:

Ref	Risk Title	June	July	Aug	Risk Trend	Target Score	Commentary
2197	Ability of NHS Lanarkshire to Deliver a Balanced Budget within Periods 23/24 – 25/26	20	20	20		9	Risk reviewed with no change in August.
2218	Urgent & Unscheduled Care	20	20	20		6	Risk reviewed with no change in August.
2219	Planned Care	20	20	20		6	Risk reviewed with no change in August.
2274	Non-Compliance with HCSW Agency Use DL(2024) 04	20	20	20		4	Risk reviewed with no change in August.
2038	Procurement of new NHS Lanarkshire Labs Managed Service Contract	16	16	16		4	Risk reviewed with no change in August.
2213	Ability to Respond to Climate Change	9	9	9		9	Risk reviewed with no change in August.
2212	Failure to Comply with NHS Sustainability Policy, DL (2021) 38	16	20	20		9	Risk reviewed with no change in August.
2230	UHM Fire Safety Waste Receptacles	8	8	8		6	Final designs and prices are underway and will be concluded during this financial year with potential that work can commence at the end of the financial year.

Corporate Risk Trends



18 Corporate Risks reported

- 9 are very high (no change)
- 4 are high (decrease of 2 from previous report)
- 5 are medium (increase of 1 from previous report)

18 Corporate Risks reported

- 9 are Business risks
- 7 are Clinical risks
- 2 are staff risks