

**NHS Lanarkshire Board**  
**30<sup>th</sup> August 2023**

**Subject: Corporate Risk Register Overview**

## 1. Purpose

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This paper is coming to the Board for:

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 checked="" type="checkbox"/>	Endorsed	<input checked="" type="checkbox"/>
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By the Corporate Risk Manager and Corporate Management Team at its meeting held on 21<sup>st</sup> August 2023.

## 3. Background and Summary of Key Issues

Effective Risk Management is a fundamental cornerstone of good Corporate Governance and Internal Control and is an essential component in the delivery of the NHS Board's corporate objectives.

The NHS Lanarkshire corporate risk register is considered frequently by the corporate management team, who discuss new and emerging risks; very high graded risks across NHS Lanarkshire, mitigating controls and risks that exceed the corporate risk appetite.

The enclosed report (appendix 1) and the subsequent Corporate Risk Register in full (Appendix 2) presents an update to the Corporate Risk Register for the reporting period June 2023/24 – August 2023/24.

Summary of material changes to the risks within the Corporate Risk Register:

- Six new risks are proposed: **2218** – Urgent & Unscheduled Care, **2219** – Planned Care, **2220** – Junior Doctors Industrial Action, **2221** – Non Compliance With Off Framework DL(2023)5, **2222** – Nurse Agency Use & **2234** – Nursing Home Beds
- One risk has been escalated: **2230** – UHM Fire Safety Waste Receptacles
- Three risks have decreased in score: **2205** – Fire Safety Within NHSL, **2212** - Failure to Comply with NHS Sustainability Policy, DL (2021) 38 & **2213** – Ability to Respond to Climate Change
- Two risks have been de-escalated: **2205** – Fire Safety Within NHSL & **2073** – NHSL Reputation Regarding FAI's

- Two risks have been closed and removed from the Corporate Risk Register: **2125** – Optimal Clinical Outcomes & **2220** – Junior Doctors Industrial Action

#### 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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#### 6. Measures for Improvement

On 18th July, there was a Board briefing on risk register reporting built on the fundamental requirements for risk register management, scrutiny & assurance. The presentations focussed on the current governance structure; the role of the Audit Committee; working definitions of risk appetite & tolerance; risk taking and current risk reporting.

The corporate risk manager proposed a change to the governance committee reporting including a new process for completion of individual assurance reports for each corporate risk. This was considered and agreed to progress with a view to evaluation later in the year.

The systems essential to supporting this new process, including the training of designated person to complete the assurance report; the setting up of a cross-function file to enable access to all templates and reports; the support for risk owners; guidance on completion of the assurance report and the development of 'credit card' information are currently being set up.

The first of the new reporting proposal was tested and prepared for the Audit Committee on 6th September for consideration. It is important to note that due to retirement, this new assurance reporting will not be fully in place until all the essential preparatory systems are in place and there is risk management resource to progress this.

#### 7. Financial Implications

All very high and high graded risks will be considered in terms of exceeding the corporate risk appetite against the adequacy of mitigating controls and action planning that might require a more intensive supported financial 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**

An E&D Impact Assessment has been completed

Yes

No

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

**11. Consultation and Engagement**

This paper has been discussed and endorsed by CMT and prepared for onwards assurance to the board.

**12. Actions for the Board**

The Board are asked to:

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

Board members are asked to:

- Consider the content of the attached report in Appendix 1 for approval.

**13. Further Information**

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

Mr P Cannon	Ms Charlotte Hope	Mrs J Gardner
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