

Corporate Risk Register

Update and commentary

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Date: 23/01/14

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Background & Context

1. The Corporate Risk Register currently holds risks that are both strategic and operational in nature. The Corporate Risk Team have proposed that these should be separated, allowing the Board to focus on Corporate Strategic risks and the Executive Management Team (EMT) and Portfolio Board to concentrate on Corporate Operational (including programme) risks.

Current Risks

2. There are currently five risks on the Corporate Risk Register that are clearly “Strategic” in nature (numbers 1, 3, 4, 10 and 11). In addition, risks 7, 8 and 9 logically aggregate into a single further Strategic risk.
3. As well as risks 7-9, there are four additional risks recorded (numbers 2, 5, 13 and 14) that are “Operational” in nature.
4. For future reports to the Board, it is proposed to only include the strategic risks plus the new ones identified at the recent EMT workshop along with significant new risks that EMT consider merit Board attention.

Current Issues

5. The Risk Register also contains six issues, three of which (7, 10 and 11) are Strategic in nature; the other three are operation issues.
6. Issue 11 (relating to the operation of the NHS Choices service) is new this reporting period and has been triggered from risk 6 (now closed), due to our inability to mitigate that risk effectively. Response actions to this issue are currently being considered by the owning directorate.

Corporate Risk Team Commentary

7. In general, the quality of our risk and mitigation articulation is much improved over previous versions, but we recognise that there is further work to be done, specifically:
 - a. Ensuring that we have a comprehensive set of Strategic risks captured, and
 - b. Ensuring that the controls and mitigations recorded against each risk are accurate and effective.
8. The EMT held a strategic risk identification workshop on 23rd January 2014 and we are confident that once the risks captured during that workshop are fully articulated and appropriate actions identified, the first of these objectives will have been achieved.
9. We anticipate being able to present the fully worked up Strategic risk set to the next Board meeting for consideration and approval.
10. Of the currently reported risks we draw the Board’s attention to the following:
 - a. Risk 3 - Ensuring HSCIC function is clearly communicated to and understood by the wider health and care system (including DH). At the recent EMT

workshop, a number of additional concerns affecting and opportunities to improve perceptions of the HSCIC were articulated.

- b. Risk 14 – Transfer of services from NHS Direct. In several ways, this risk is similar to the closed risk 6. As mitigation of risk 6 was not successful, we should consider whether our responses to this risk are as robust as we would want.

11. Of the currently reported issues, we draw the Board's attention to the following:

- a. Many of the response actions are reported as completed, but the impact assessment has yet to be updated from when the issue was first raised. This will be addressed as part of the quality improvement activities being co-ordinated by the Corporate Risk Team.
- b. In general, we need to improve clarity of accountability for the prompt completion of actions. Most of those recorded on the Issues Register either: do not have specific completion dates; or the completion dates are rolled forward. This is an area the Corporate Risk Team will be focussing on as part of our quality review. A metric, that can track frequency of changes to action target dates, will be developed for our risk management performance measurement KPI.

Recommendations

12. The Board are asked to note this paper and the attached Corporate Risk Register.

13. To note subsequent to EMT consideration, future reporting will be developed alongside a strategic risk management KPI.