

Title of paper:	Risk Register
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Exec Lead:	Miles Freeman, Chief Officer
Date:	10 th May 2013
Locality:	All
Meeting:	Governing Body 17 th May 2013
Agenda item:	8
For:	Discussion
<p>Key issues</p> <ul style="list-style-type: none"> • The CCG has a requirement in terms of its own constitution to put in place systems of integrated governance that cover risk management and internal control. Best practice is that the organisation will have a risk management strategy; an assurance framework that covers risks to achieving principle objectives; and a more detailed risk register that is an operational tool for managing risks as they occur. • Although there are no prescriptive requirements, there is an expectation that this will be done in line with best public sector practice, namely: <ul style="list-style-type: none"> — channel information requirements and guide the more effective use of information in support of Board decisions — align as one single evidence base the Assurance Framework, compliance with authorisation, anticipated risks and regulators' requirements <p>(updated from the Integrated Governance Handbook)</p> <ul style="list-style-type: none"> • The CCG adopted arrangements during its authorisation / shadow period and is now in a position to formally present its current risk register. This is work in progress and will develop over time. • There is a separate and detailed risk register for Continuing Health Care (CHC). This corporate risk register contains four high level CHC risks. 	

- The former Surrey PCT highlighted a number of risks to CCGs collectively and individually which have been reviewed. The current risk register incorporates these in a revised form.

Actions taken or in hand

- The risk register has been reviewed by the Executive Committee and in detail by the Chief Officer and Executive Leads (Chief Finance Officer, Head of Quality, Head of Performance, Chief Operating Officer).
- The risk register will be scheduled for review by the Executive Committee on a monthly basis from the beginning of June, to feed into Governing Body meetings
- There is a scheduled meeting for the Audit, Corporate Governance and Risk Committee which will make recommendations for the development of the risk register, risk strategy and assurance framework.

Accompanying Risk methodology; Risk register

ATTACHMENT 6

Risk Methodology

IMPACT:					1	2	3	4	5
Domains					Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety of patients, staff or public									
Quality/complaints/audit									
Human resources/ organisational development/ staffing/competence									
Statutory duty/ inspections									
Adverse publicity/ reputation									
Business objectives/ projects									
Finance including claims									
Service/business interruption Environmental impact									
Score									

Note: where the consequences of a risk cross over a number of domains, the highest score should be used.

LIKELIHOOD:					1	2	3	4	5
Domains					Rare	Unlikely	Possible	Likely	Almost certain
Score									

SCORING:		Likelihood						
		1	2	3	4	5		
		Rare	Unlikely	Possible	Likely	Almost certain		
Impact	5 Catastrophic	5	10	15	20	25	15 - 25	Extreme risk
	4 Major	4	8	12	16	20	8-12	High risk
	3 Moderate	3	6	9	12	15	4-7	Moderate risk
	2 Minor	2	4	6	8	10	1-3	Low risk
	1 Negligible	1	2	3	4	5		

Score	Risk Level	Action Required	Level of Authority
1-7	Low to moderate risk	The majority of control measures are in place. Harm severity is small. Action may be long term	Warrants manager attention
8-12	High risk	Moderate probability of moderate harm if control measures are not implemented. Action in mediate term	Warrants Head of Service attention
15, 16, 20	Extreme risk	Significant probability that major harm will occur if control measures are not implemented URGENT action required. Director may consider limiting or halting activity	Warrants COO attention
25	Unacceptable	Halt activities IMMEDIATELY and review status	Warrants Chief Officer immediate attention