

MAINTAINING THE HSE CORPORATE RISK REGISTER

Guidance Document

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1.0 Background

Risk Management equates to good management practice, it is a proactive approach that aims to identify, assess and prioritise risk, so as to minimise negative consequences including unintended harm to patients and service users. Risk Management is an underpinning requirement for all areas of governance and the HSE is committed to ensuring that risks are managed appropriately in line with statutory, mandatory and best practice requirements. The HSE utilises an integrated approach to risk management incorporating both clinical and non-clinical risk. Where risks identified have significant potential to impact on the objectives of the HSE they may be populated onto the Corporate Risk Register.

2.0 The HSE Corporate Risk Register

The risk register is a tool, which enables the HSE to record its risk profile. It contains details of all high level risks, existing controls, and additional controls /actions required. It provides a structure for collating information about risks that helps in decision making about whether or how the identified risks should be treated, managed or monitored. The risk register provides management with a high level overview of the organisation's risk status at a particular point in time and becomes a dynamic tool for the monitoring of actions to be taken to mitigate risk.

The Risk Register is a valuable tool in enabling the HSE to:

- Assess its key risks and determine its priorities
- Develop the HSE Corporate and National Service Plans based on the organisation's most important priorities and development needs.
- Anticipate likely areas of impact and mitigate where possible up to and including transferring resource from lesser priorities.
- Track the management response to identified risks.
- Communicate the HSE risk profile to stakeholders including DoH&C
- Inform audit planning process

The Corporate Risks are managed by the HSE Senior Management Team. The ongoing maintenance, monitoring and reporting on the corporate register is the responsibility of the National Director, Quality and Patient Safety.

3.0 Purpose of Guidance

Taking informed, transparent decisions and managing risk are essential elements of good governance. For the HSE, the expectation is that there is a rigorous and transparent process in place in relation to strategic decisions and that this is supported by good quality information, advice and support within the organisation. In relation to risk, it is essential that there is an effective risk management system in operation. The purpose of the HSE Risk Register is to provide a comprehensive prioritised list of recognised risks which threaten the achievement of the HSE's objectives. The purpose of this procedural guidance is to ensure that the Corporate Risk Register is monitored and maintained in a transparent and robust manner.

4.0 Scope

This procedural guidance relates specifically to the Maintenance of the HSE Corporate Risk Register and sits within the overall HSE Risk Management Policy and Guidance. It is essential that identified risks are managed at the appropriate level in the organisation and decisions on whether to act or otherwise are taken within an appropriate timescale by the relevant line management. Therefore a structure of Local, Regional and Directorate Specific Risk Registers will underpin the Corporate Risk Register.

The HSE risk management process can be applied uniformly to all areas of clinical and non clinical risk including financial risk. The output of this process will be an integrated risk register.

Criteria for risk to be included in Corporate Risk Register:

- It represents an organisation wide risk that threatens the achievement of one or more of the HSE Corporate Objectives
- It has significant potential to impact on the operational or financial ability of the HSE in delivering services or may adversely affect the HSEs reputation
- It cannot be addressed at local management level or by a single Directorate
- The control measures required call for a shared management team response
- It is likely to require considerable input of resources (financial, people, time etc)

5.0 Related policies

This guidance document on maintaining the HSE Corporate Risk Register supports implementation of the following overarching policy and governance requirements

- Framework for the Corporate and Financial Governance of the HSF
- → HSE's Integrated Risk Management Policy
- Risk Management in the HSE An Information Handbook (Document Ref: OQR011)
- Developing and Populating a Risk Register Best Practice Guidance (Document Ref: OQR010)

6.0 Roles and Responsibilities

The **CEO and HSE Management Team** are responsible to ensure that the Corporate Risk Register contains the principal risks—that impact on the delivery of the HSE objectives and that suitable and agreed risk mitigation plans are in place. **National Directors** will be assigned coordinating roles for the management of individual risks.

The **National Director Quality and Patient Safety (Q&PS)** is responsible for ensuring that a system is in place to maintain and monitor the Corporate Risk Register and that reports are presented at agreed intervals and in an acceptable format to the HSE Management Team and HSE Board Risk Committee

The **Performance Monitoring and Control Committee** (PMCC) is the forum where the Corporate Risk Register is reviewed and discussed. The National Director Quality and Patient Safety is responsible to ensure that the risk register is presented for discussion at required intervals at PMCC.

7.0 Directorate Risk Registers

Each **National Director** must have in place a Directorate specific risk register. These registers will contain risks which may affect the performance or achievement of objectives for that area. These risks will ordinarily be managed and monitored at Directorate level. Where this is not possible, such risks may be referred to the Corporate Risk Register for consideration and prioritisation.

It is critical that there is connectivity between the Directorate Risk Registers and HSE Corporate Register. In order to ensure that significant risk issues may be escalated for consideration – each Directorate must report on a bi-monthly basis to the National Director Q&PS who will provide a suitable report to PMCC Group (**Template 1**).

8.0 Procedure/Guideline for maintaining the HSE Corporate Risk Register (see flow diagram 1)

The Corporate Risks will be formally reviewed and discussed on a bimonthly basis.

The National Director Q&PS will provide overall coordination for the updating process.

Each National Director assigned to coordinate individual risks on the Corporate Risk Register will be responsible to ensure individual actions / additional controls identified to mitigate the risk are reported on, including whether they are on schedule, behind schedule or complete. The coordinators will require an update from each action owner.

The individual risks will be presented for discussion at PMCC, this will include consideration of the adequacy of existing controls, review of action plan and revision of risk rating as required.

Following agreement at PMCC, the National Director Q&PS will present a bi-monthly risk register report to the HSE Management team.

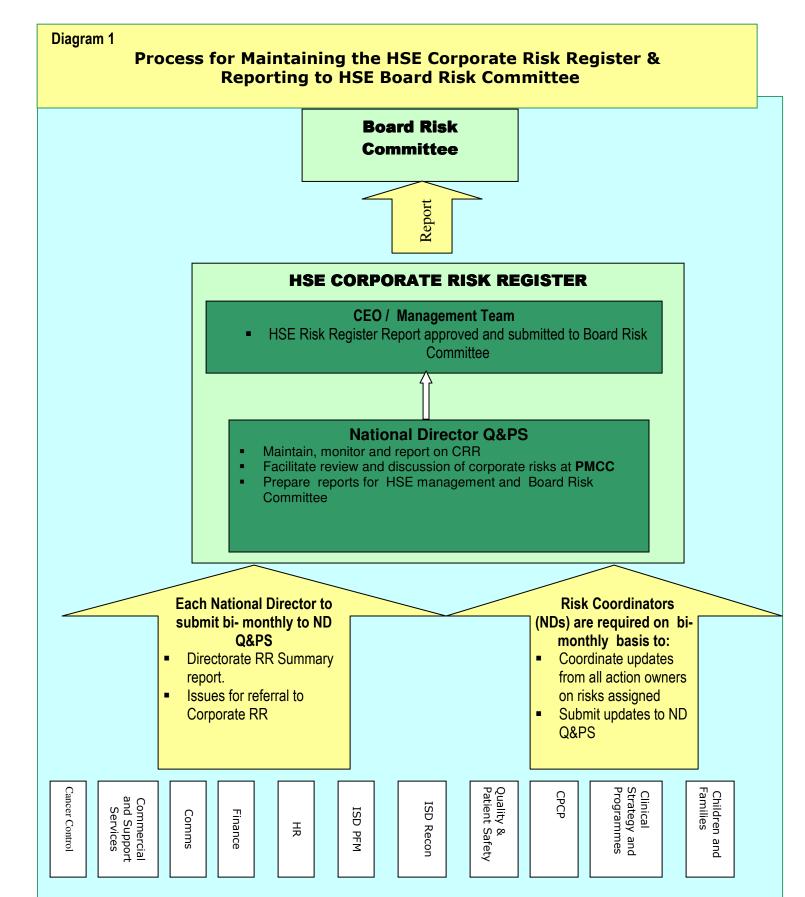
The Board Risk Committee will be provided with suitable reports on the Corporate Risks by the National Director Q&PS at agreed intervals. Sample report (template 3)

The National Director Q&PS will require formal bi-monthly updates from each National Director on their Directorate specific risk registers (**template 1**) – any risks to be considered for escalation to the Corporate Risk Register should be flagged on the bi-monthly report and submitted on the prescribed form (**template 2**).

All risks populating the Corporate Risk Register must be supported by a full risk assessment including the nature of the risk, the consequences of the risk, the proposed action(s) or options for action/ additional controls where relevant, names of action owners and dates for review

9.0 Recording of Risk Register Information

To assist with the ongoing information management, reporting and monitoring elements of the Risk Register process an ICT system is required. Until the system is available the registers will be maintained manually using Excel templates.



Template 1

BI – MONTHLY DIRECTORATE RISK REGISTER REPORT for NATIONAL DIRECTOR Q&PS

DIRECTORATE:	
NATIONAL DIRECTOR:	
REPORTING PERIOD:	

	Unique ID	Date entered	Risk Description	Risk Rating	Change since
	ID	entered on register			since last report*
DF					
RECTC					
RATE					
DIRECTORATE NAME					

Tem	plate	2
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Corporate Risk Issue(s) Notification to National Director Quality and Patient Safety

Risk Description Context /Cause /Impact	Vulnerabilities /Impacts	Existing Control Measures	Risk Rating	Proposed Additional Control s /Actions	Person responsibl
EASON(S) FOR REFERRAL/ES	SCALATION TO CORPORAT	E RISK REGISTER			

Template 3

HSE CORPORATE RISK REGISTER BI MONTHLY SUMMARY REPORT

Reporting Period:

RY	Unique ID	Risk Description	Risk Rating	Change since last report*	Issues of note
- SUMMARY					
EGISTE IRT					
RISK RI REPO					
RATE I					
HSE CORPORATE RISK REGISTER REPORT					
HSE (

*Change since last report	←→ = RISK RATING REMAINS THE SAME:	= risk rating increased :	_	= risk rating decreased.
Change since last report	- KISK KATING KEWIAINS THE SAWE,	T - risk rating increased,	•	- risk rating decreased.