

**APPENDIX 1**

Table showing the status of action taken to address the 15 recommendations from Internal Audit Report.

No	Key Risk / Control weakness	Management Action
1	There is a lack of promotion and awareness of risk management across the organisation, more notably at times of vacancy which means that the risk management agenda may not be advanced.	Discussions have been held with Risk Executive Group and Audit and Risk Committee members regarding a Risk Champion. A Non-Executive Board Member has been appointed to this role and will be attending future Risk Executive Group meetings.  <b>Closed</b>
2	Where a plan to action the stipulations of the IJB Risk Management Strategy is not established there is a risk that risk management arrangements are not initiated timeously and that arrangements fail to meet those set out by the strategy.	The Risk Steering Group continues to support Directorates to develop their implementation plans. Review during Annual Review process.  <b>Ongoing – Plans progressing to implement</b>
3	Risk Management documents are not up-to-date which means that current guidance is not available to the workforce and documents do not capture document control.	The Risk Management Strategy has been updated to meet with the Document Development and Approval Policy and was approved through Audit and Risk Committee in March 2017.  The Risk Register Policy, Adverse Event Policy and the Significant Adverse Event Guidance have been reviewed and are awaiting approval through the relevant committees.  <b>Ongoing – awaiting approval</b>
4	There is a risk to embedding risk management arrangements where there is inconsistency in terminology and documents are not explicit in defining key roles.	As part of the document review process, a consistency check on the terminology used within the documents has been undertaken by the Risk Steering Group (RSG) approval is now sought for all Risk policies, procedures and guidance from relevant committees.  <b>Ongoing – awaiting approval</b>
5	There is a risk to the achievement of risk management goals where the Risk Management Strategy does not define what will be measured and reported to demonstrate the achievement of such goals. Further, where there is no correlation between the Risk Management Strategy and annual risk management reporting there is a risk that reported statistics are of no organisational value.	Existing KPI's are routinely reviewed by RSG with proposals taken to Risk Executive Group on how they can be developed throughout the year to improve on the performance reporting aspects of risk and adverse incidents.  Details on revisions to the KPIs will be included within future updates of the Risk Management Strategy and evidenced within the Annual Risk Management Report.  <b>Ongoing – development of the KPIs will be undertaken during the year and included in the next Strategy update</b>

No	Key Risk / Control weakness	Management Action
6	There is a risk to staff training and awareness in relation to adverse event reporting where training is not promoted and assessed.	<p>A review of the learnPro module has been undertaken and will be actively promoted to all staff to raise awareness of risk management and adverse incidents.</p> <p>A clear Board wide communication will be developed to direct staff to the revised module for training, which will also include appropriate assessment of staff knowledge.</p> <p><b>Ongoing – changes have been made to the module with promotion activity ongoing.</b></p>
7	Where there is no framework for risk management training there is a risk that staff knowledge of risk management and local arrangements is varied and inconsistent. Ultimately this could impact risk maturity where the Risk Management Strategy is not being fulfilled.	<p>A training needs assessment has been undertaken and will inform a risk training plan. The RSG will develop an implementation plan for approval by Risk Executive Group.</p> <p><b>Ongoing – Plan is currently under development</b></p>
8	Where a process and responsibilities for the review of corporate risks is not defined such risks could lack the necessary review to ensure corporate objectives are being achieved and associated risks managed.	<p>A robust process is highlighted within the Risk Management Strategy around the review and development of Corporate Risks.</p> <p><b>Closed</b></p>
9	There is no clear role of a Risk Facilitator for those where this does not form part of their job description presenting a process weakness where identified individuals are unclear of their responsibilities in assisting risk management oversight.	<p>A definition of this role is included within the Risk Management Strategy. A copy of the Risk Facilitator role definition has also been circulated to both RSG and Risk Executive Group members and agreed with General Managers who require to update job descriptions</p> <p><b>Closed</b></p>
10	There is a risk that KPIs are not being used and therefore continuous improvement through performance monitoring is not being fostered where measures are of limited organisational value and presentation of KPIs is not meaningful.	<p>Existing KPI's will be routinely reviewed by RSG with proposals taken to Risk Executive Group on how they can be developed throughout the year to improve on the performance reporting aspects of risk and adverse incidents.</p> <p><b>Closed</b></p>
11	There is a risk to organisational performance where the timescales for the closure of adverse events is not communicated consistently between documents resulting in variances in compliance.	<p>As part of the document review process, a consistency check on the terminology used within the documents has been undertaken by the Risk Steering Group.</p> <p><b>Closed</b></p>

No	Key Risk / Control weakness	Management Action
12	There is a risk to the embedding of organisational risk management arrangements where risk registers are not routinely reviewed in accordance with the stipulations of local policy.	<p>Risk Facilitators undertake this work within their directorate.</p> <p>Corporate Business Manager carries out quarterly reviews with corporate directorates.</p> <p><b>Ongoing</b></p>
13	The risk management agenda is at risk where the supporting resource is not sufficient to drive and develop organisational needs in accordance with local strategy.	<p>This risk has been assessed and a Control Plan has been agreed with Risk Executive Group.</p> <p>A discussion has been held at Risk Executive Group as to whether it would be appropriate to add this as a risk to Datix following the current review of staffing resources for the team.</p> <p><b>Closed</b></p>
14	Where all directorates are not represented by the RSG and the group is lacking a clear workplan to advance risk management practice there is a risk to the embedding of risk management arrangements and achievement of the organisational goals set out by the Risk Management Strategy.	<p>An analysis of the RSG membership has been undertaken with additional members asked to attend.</p> <p>An annual workplan will be developed for the RSG and agreed by Risk Executive Group.</p> <p><b>Ongoing</b></p>
15	There is a risk to the embedding of risk management where there is a reactive clinical focus.	<p>A review of the staffing resource and team structure for Risk Management has been undertaken. The role of Adverse Event Coordinator has been increased from 30 hours to 37.5 hrs.</p> <p>The REG has agreed to prioritise workload.</p> <p><b>Ongoing</b></p>