

HSC Northern Ireland Ambulance Service Health and Social Care Trust



Title:	Corporate Risk Management Policy			
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Ownership:	Dr Nigel Ruddell, Medical Director			
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Other Relevant Policies / Procedures:	Health and Safety Policy and Procedures, Risk Assessment Procedure, Complaints Policy, Assurance Framework, Information Governance Policies and Procedures, PPI Strategy, Serious Adverse Incidents (SAI) Procedure, Incident Reporting Procedure, Guidelines for Writing A Report/Statement (pending), Management of Medical Devices Policy, Claims Management Policy, Whistle Blowing Policy, Infection, Prevention & Control Policy & Procedures.			

Version Control:				
Date:	Version:	Author:	Comments:	
April 2019	2.0	Risk Manager	Scheduled Review	
October 2016	1.0	Risk Manager	New	

1.0 INTRODUCTION:

How effectively we manage risk directly impacts on how effective we are as an organisation.

1.1 <u>Background:</u>

This Corporate Risk Management Policy sets out the Northern Ireland Ambulance Service Health and Social Care Trust's (NIAS) approach to the management of risk across the organisation. This Policy is supported by the Corporate Risk Management Strategy which establishes a framework for the effective and systematic management of risk across NIAS. Both the Policy and Strategy form part of the Trust's internal control and corporate governance arrangements.

1.2 <u>Purpose/Aim/Objective(s)</u>:

The purpose/overall aim of this Corporate Risk Management Policy is to demonstrate the corporate commitment to effective risk management, calling upon all NIAS employees to engage in, and be responsible for managing relevant risks.

2.0 SCOPE:

Risk is an inherent aspect of emergency care and its supporting activities. This Corporate Risk Management Policy applies to all aspects and activities of the Trust; it covers the management of all risks across the organisation.

3.0 ROLES/RESPONSIBILITIES:

In the Northern Ireland Ambulance Service, risk management it is everyone's business. Everyone is both a risk taker and a risk manager, regardless of level, role or location, and it is essential that everyone takes relevant responsibility for delivering effective risk management, so as to support the continual improvement of a vital service.

The Corporate Risk Management Strategy includes a Responsibility, Accountability and Support (RAS) matrix which defines key corporate level roles and responsibilities.

4.0 KEY POLICY PRINCIPLES:

At the Northern Ireland Ambulance Service Health and Social Care Trust (NIAS) we recognise that effective risk management is essential in achieving our strategic aims and objectives as identified within the Annual Business Plan and Trust Delivery Plan.

There is a clear recognition that we must accept a level of risk in order to meet the high standard we set ourselves, and that is expected by the society we serve in the provision of a service in a potentially uncontrolled, unstable or even hostile environment. We accept the potential costs of such risks in the realisation that the benefits to patients can outweigh the risks; for example in emergency driving, Rapid Response Paramedics working alone and in the work of Hazardous Area Response Teams (HART). We acknowledge our staff regularly accept and manage significant risk in order to help others; for them not to do this would render us a much less effective organisation.

Each significant risk will be assessed individually when deciding whether it is within our risk appetite (tolerable), or whether additional controls (terminate, treat or transfer) are required. The following risk appetite principles will be applied.

The Northern Ireland Ambulance Service Health and Social Care Trust's:

- a. Appetite for risks relating to patient safety and employee health and safety is very low, with controls required to reduce the risks so far as is reasonably practicable.
- b. Appetite for risks relating to regulatory compliance, fraud, and information governance is also low, requiring appropriate risk controls.
- c. Appetite for risks to non-critical functions and services is higher, whilst taking into account any potential impact on any strategic/business objectives.
- d. Approach to risk management is designed to encourage and promote innovation and continual progress, and not to stifle or hinder growth and development, and NIAS appetite for risks to its strategic and/or directorate objectives should reflect this.

With the above in mind, through the implementation of this Policy and the Corporate Risk Management Strategy, so far as is reasonably practicable, we will ensure the following:

- The comprehensive identification, assessment and overall management (including timely escalation) of all types of risks in order to achieve our objectives.
- Staff have suitable training to help them make balanced/difficult judgements on risk.
- That opportunities are exploited to improve practice and embed good practice where this is identified.
- That effective and efficient assurance processes are in place.
- Adequate policies and procedures are in place for the purpose of internal control.
- A high standard of incident reporting, escalation and management.
- Learning from adverse incidents and from examples of good practice is disseminated and implemented across the entire organisation.
- Everyone is accountable and responsible for their actions.
- The further development of open, honest and just (fair) culture.
- Arrangements are in place to manage risks highlighted by audits/inspections.
- Continual improvement in risk management and therefore the quality of care.

Through effective risk management we will endeavour to provide a safe environment for patients, staff and visitors by reducing and where possible eliminating the risk of harm. We will provide a service that is responsive, safe, high- quality, patient focused, clinically effective, financially viable, legally compliant and well governed.

We will ensure compliance with current guidance and best practice, for example policy, procedures, guidance, safety/quality information issued by DoH, HSCB and PHA, including national and regional guidance and learning letters. We will also ensure compliance with risk management best practice and guidance including, DoH guidance, ISO 31000 Risk Management Principles and Guidelines, Risk Management Standard for Ambulance Services – NHSLA 2013-14, and the Institute of Risk Management ERM guidance. We will also ensure compliance with other relevant NIAS Policies and Procedures.

5.0 IMPLEMENTATION OF THE POLICY:

5.1 Dissemination:

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- Directors and Assistant Directors will disseminate to all staff.
- It is available on the Internet, Intranet and SharePoint so that all employees and members of the public/stakeholders can easily have access.
- It is on the notice boards in all operational areas.
- It is included in Corporate Induction, Employee Resource Packs and Workbooks.

5.2 <u>Resources:</u>

Whilst there are no additional resources required for the implementation of this Policy, everyone should be encouraged to identify and report risks and should be provided with the time necessary to manage them in accordance with the Corporate Risk Management Strategy.

5.3 Exceptions:

This Policy applies to all those working within, providing services to or acting on behalf of the Northern Ireland Ambulance Service Health and Social Care Trust. There are no exceptions.

6.0 MONITORING:

This Corporate Risk Management Policy and the Corporate Risk Management Strategy will be reviewed every three years. Feedback from stakeholders will be taken into consideration, along with a review of systems/processes along with ongoing analysis of the actual management of risks via the assurance structure. Processes will be benchmarked nationally and any new legislation, best practice or guidance will be taken into account. Audit findings will be taken into consideration.

7.0 EVIDENCE BASE / REFERENCES:

This Corporate Risk Management Policy reflects a range of risk management standards, current guidance and best practice (DoH guidance, ISO 31000 Risk Management Principles and Guidelines, Risk Management Standard for Ambulance Services – NHSLA 2013-14, Institute of Risk Management ERM guidance etc.). It also builds on the previous version (V.1).

8.0 CONSULTATION PROCESS:

This Corporate Risk Management Policy was developed by the Risk Manager in consultation with the Medical Director and the Senior Executive Management Team. The Policy has been approved by Trust Board.

9.0 EQUALITY STATEMENT:

9.1 In line with duties under Section 75 of the Northern Ireland Act 1998; Targeting Social Need Initiative; Disability Discrimination Act 1995 and the Human Rights Act 1998, an initial screening exercise, to ascertain if this policy should be subject to a full impact assessment, has been carried out.

9.2 The outcome of the equality screening for this policy undertaken on 8th April 2019 is:

Major impact□Minor impact□No impact.✓

10.0 SIGNATORIES:



Katrina Keating

Date: 18th June 2019

Lead Author

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Lead Director

Date: 18th June 2019