



Respect



Integrity



Teamwork



Ethical
Behaviour

Cohuna District Hospital

Board of Management
Risk Appetite Statement

Overview

Our mission is to deliver the best of available health and wellbeing services to our community.

The aim is to do this through the provision of high quality, effective and safe services which improve the health, wellbeing and independence of the population it serves.

The Board of Management (the Board) recognises risk is inherent in the provision of healthcare and its services, and therefore a defined approach is necessary to identify risk context, ensuring the Board understands and is aware of the risks its prepared to accept in the pursuit of the delivery of its Mission.

This statement sets out the Boards Strategic Approach to risk-taking by defining its boundaries and risk-tolerance thresholds, and supports delivery of services through its adopted frameworks and inherent policies.

As a background to discussion, currently the BOM and CDH have in place the following endorsed Frameworks and Policies that have been implemented to guide operational applications surrounding Risk:

- Cohuna District Hospital Risk Framework
- Cohuna District Hospital Risk Management Policy
- Financial Risk Management
- Risk Management and Continuous Improvement Plan
- Construction, Renovation and Maintenance Risk Management
- Strategic Workforce Plan 2020 - 2023



Consumer Safety

We will hold consumer safety in the highest regard and are strongly averse to any risk that may jeopardise it.

This key concept is a driver that supports our Mission to provide the best of available healthcare to our community.

It can be in the interest of consumers to accept some risk in order to achieve the best outcomes from individual consumer care, treatment and therapeutic goals.

We accept this and support our staff to work in collaboration with our consumers to develop appropriate and safe care plans and pathways based on the assessment of need and clinical risk.

Category	Board Committee/ Sub-Committee	Divisional Governance Committee
Consumer Safety	Risk Rating of 7 and above will be itemised and tabled with identified actions and treatments at the Clinical Governance Committee each meeting	<p>All consumer safety incidents will be reviewed monthly at Operational Clinical Governance and Medical Consultative Committees.</p> <p>Risk Ratings will be reviewed quarterly by the responsible Executive and reviewed by Committees for enhanced treatments prior to presentation to the Board of Management.</p>

Category	Board Committee / Sub-Committee	Divisional Governance Committee
Clinical Effectiveness	Risk Rating of 7 and above will be itemised and tabled with identified actions and treatments at the Clinical Governance Committee each meeting.	<p>All consumer safety incidents will be reviewed monthly at Operational Clinical Governance and Medical Consultative Committees.</p> <p>Risk Ratings will be reviewed quarterly by responsible Executives and reviewed by Committees for enhanced treatments prior to presentation to Board Members.</p>

Clinical Effectiveness

We will provide high quality services to our consumers and not accept risks that could limit our ability to fulfil this objective.

We are strongly averse to risks that could result in poor quality care or unacceptable clinical risk, non-compliance with required standards or poor clinical or professional practice.

Finance

We will strive to deliver our services within the budgets and the strategic and operational plans guiding service delivery.

However, budgetary constraints will be exceeded if required to mitigate risks to consumer safety or quality of care.

All such financial responses will ensure optimal value for money.

Category	Board Committee / Sub-Committee	Divisional Governance Committee
Finance	Risk Rating of 7 and above will be itemised and tabled with identified actions and treatments at the Finance Committee each meeting.	All Financial or Capital related incidents will be reviewed monthly at Heads of Department Meeting. Risk Ratings will be reviewed quarterly by responsible Executives and reviewed by Committees for enhanced treatments prior to presentation to Board Members.

Infrastructure

We are committed to providing consumer care in a safe and therapeutic environment.

We will provide staff with appropriate space and supporting infrastructure in which to perform their duties.

Category	Board Committee / Sub-Committee	Divisional Governance Committee
Infrastructure	Risk Rating of 7 and above will be itemised and tabled with identified actions and treatments at the Finance Committee each meeting.	All Financial or Capital related incidents will be reviewed monthly at Heads of Department Meeting. Risk Ratings will be reviewed quarterly by responsible Executives and reviewed by Committees for enhanced treatments prior to presentation to Board Members.



Workforce

We are committed to recruit and retain staff that meet the high quality standards of the organisation and will provide ongoing training to ensure that all staff reach their full potential.

We will not accept risks associated with unprofessional conduct, bullying or an individual's competence to perform roles or tasks safely, nor any incidents or circumstances which may compromise the safety of any staff members, consumers.

We will not accept activity from our workforce that contradicts with the Values of the organisation.

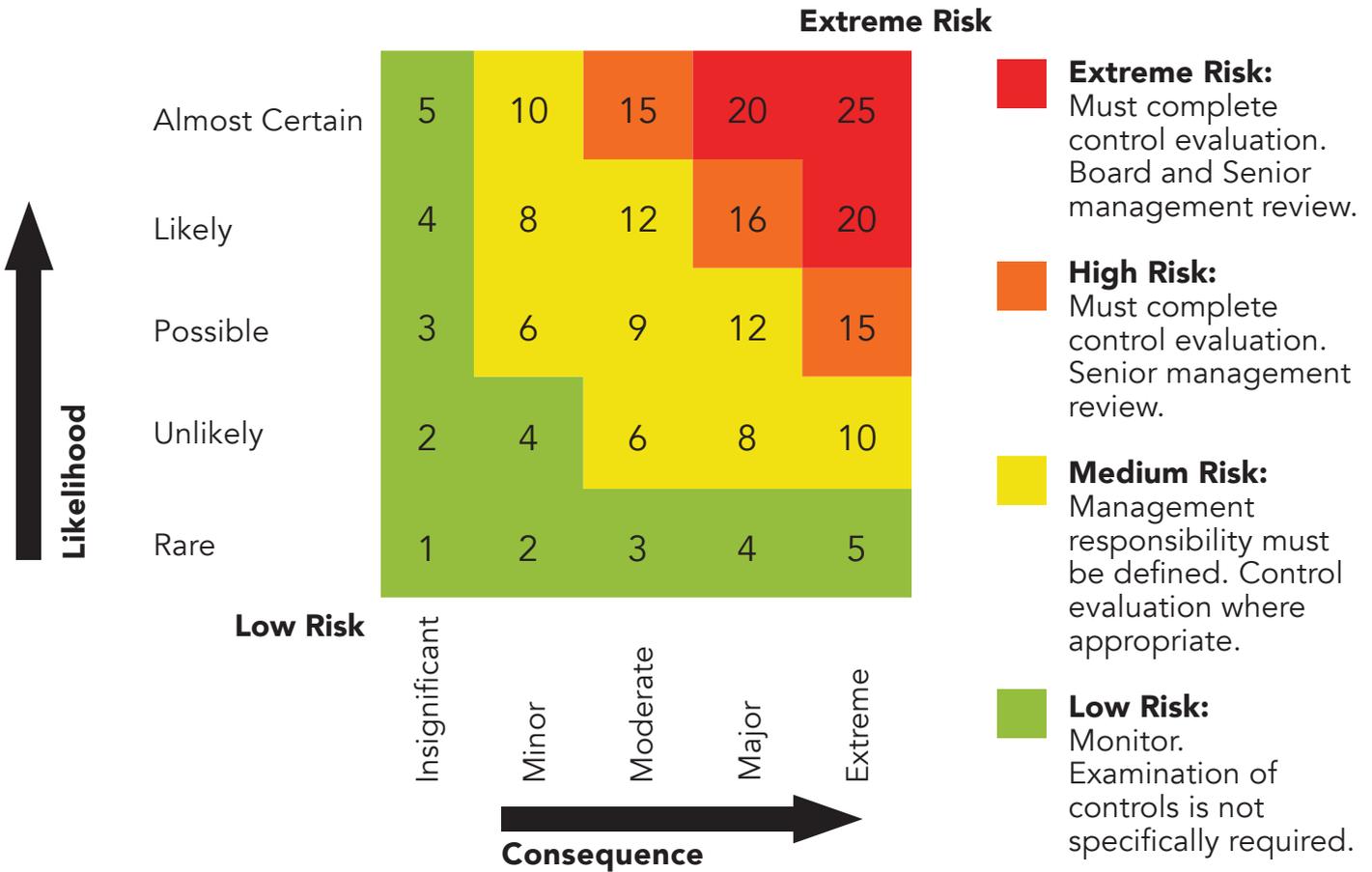
For consumer safety, quality care, service delivery and financial sustainability reasons, we are prepared to consider risks associated with the implementation of non- EBA roles or terms of employment, innovative resourcing and staff development models.

We are strongly adverse to any risk that could result in staff being in non-compliance with legislation, or any frameworks provided by the organisation or professional bodies.

Category	Board Committee / Sub-Committee	Divisional Governance Committee
Workforce	Risk Rating of 7 and above will be itemised and tabled with identified actions and treatments at the Finance Committee each meeting.	All Financial or Capital related incidents will be reviewed monthly at Heads of Department Meeting. Risk Ratings will be reviewed quarterly by responsible Executives and reviewed by Committees for enhanced treatments prior to presentation to Board Members.



Risk Tolerance



Risk 'tolerance' is the minimum and maximum risk the Board of Management is willing to accept as reflected in the risk appetite themes above.

Detailed thresholds are reflected and articulated in the Cohuna District Hospital Risk Framework and respective Risk Management Policy by the Board of Management and are dependent on the type of risk, against which all identified risks are assessed for their likelihood and impact using a risk scoring matrix, as identified in the framework.

The Divisional Governance Committees will oversee all risks that score outside the risk appetite on a monthly basis as identified in the Divisional Governance Committee columns above.

The Board of Management have agreed that all risks with a total risk score of 7 based on the likelihood and consequence evaluation of the inherent risk in the tool below will be reviewed through Divisional Governance and updated activity provided to the identified Board of Management Committee be undertaken quarterly.

Finally, themes and trends in reported risks will be identified and tabled at least quarterly in Divisional and Board of Management Committees, and escalated as appropriate to ensure that multiple similar risks of a low impact and likelihood are not ignored.

Ross Dallimore
President

Jean Sutherland
Chair of Audit & Risk Committee