



September 2019

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Statement on internal control 2019/20

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1. Scope of responsibility

The Chief Executive has responsibility for maintaining a sound system of internal control that supports the achievement of the organisation's policies, aims and objectives. I also have responsibility for safeguarding the public funds and the organisation's assets.

The Echogenicity's Risk Management Policy states that the Chief Executive is ultimately responsible for effective risk management within Echogenicity. The Chief executive will provide evidence of the ongoing efforts to ensure that the overall governance, risk management and clinical governance systems are operating as they are supposed to.

Echogenicity is part of a local and national health economy. Accountability extends not only to Government, but also to partner organisations and to patients and service users. In recognition, our planning and key objectives reflect the strong focus that is now placed on improved and expanded partnership working.

The Chief Executive is accountable to Kernow CCG for performance and control issues.

Echogenicity has regular meetings with Sam Wilson our contracts manager at KernowCCG.

2. The purpose of the system of internal control

The system of internal control is designed to manage risk to a reasonable level rather than to eliminate all risk of failure to achieve policies, aims and objectives. It can therefore only provide reasonable and not absolute assurance of effectiveness. The system of internal control is based on an ongoing process designed to:

identify and prioritise the risks to the achievement of the organisation's policies, aims and objectives, evaluate the likelihood of those risks being realised and the impact should they be realised, and to manage them efficiently, effectively and economically.

3. Capacity to handle risk

Echogenicity's Risk Management Policy sets out Echogenicity's approach to managing risk.

It describes the structure and scope of the risk management process. The Policy shows how risks should be identified and assessed at all levels of Echogenicity; and that the results of this should be recorded in the risk registers.

The Policy describes the scoring system for assessing the severity of the risk facing Echogenicity and the mechanisms for ensuring that Echogenicity maintains its focus on the most critical risks.

The Risk Management Strategy has been made available to all staff and a copy is kept in Echogenicity's head office. The Risk Management Policy states that all staff are responsible for managing risks. Staff are provided risk management training as part of their induction process; and further mandatory training is provided, covering key risk areas, such as Health and Safety legislation, manual handling, and handling of aggressive 'clients'. All staff are expected to report incidents, via Echogenicity incident reporting system and to disseminate experience and learn from incidents.

4. The Risk and Control Framework

Echogenicity's Risk Management Policy is available to all staff and kept in Echogenicity's head office.

The Policy:

- defines the Echogenicity's attitude to risk
- defines unacceptable and acceptable risk
- recognises the legal basis of requirements for risk assessment and risk
- management describes the design of Echogenicity's risk scoring approach
- describes the function of the assurance framework and risk registers
- identifies the roles and responsibilities, for risk management, of all staff

4.1. Context for risk management

Risks are identified across all functions of Echogenicity's activity, including clinical, support services, corporate and administrative functions. Risks are not limited to insurance and health and safety issues, but include risks of non-delivery of key targets and operational objectives. The risk registers and assurance framework take account of Echogenicity's relationship with other NHS organisations and with patients and the public.

Echogenicity's risk assurance arrangements are becoming more embedded within the business planning process. The annual planning cycle, at all levels of Echogenicity, includes the requirement for specialty,

Scanning Cornwall's Hearts

divisional and departmental plans to identify and assess the risks and assurances associated with each of the key objectives identified. These risks and assurances are required to be incorporated into the relevant risk assurance registers.

All risks that are identified are assessed, for likelihood of occurrence and scale of impact should the risk occur. The assessment process uses Echogenicity's risk scoring system, which is defined in the Risk Management Policy. Risks that are considered to be significant, but which cannot be addressed at the level where they are identified, are passed up to the next level of management. The risk registers and assurance framework identify the actions planned to address the risks identified and an assessment of the likely residual risk. Risks are monitored at all levels of Echogenicity and reviewed annually.

4.2. Risks to data security

Echogenicity's overall arrangements for managing data security lie mainly with Cornwall IT services. Echogenicity has a contract with CITS who manage all of our encrypted computers, our echo report database which is stored on a secure network at RCHT (Royal Cornwall Hospital's Trust –RCHT) intranet – to allow the local DGH's instant access to our reports. CITS manages our access to the choose and book system via smartcards. CITS also provide Echogenicity Staff with secure NHS email accounts.

As part of our contract with Kernow CCG we are required to submit statistic's regarding apointments and waiting times to the DoH via a secure N3 connect. As we are such a small concern Kernow CCG have undertaken to submit these details which we supply on a monthly basis. Data is supplied via our secure NHS email account, via our encrypted computers to Kernow CCG.

All Echogenicity's echocardiogram images are stored on our digital archieving system, which is backed up to a mirrored Hard Drive – the storage system is kept in Echogenicity's head office.

Echogenicity's annual self assessment declaration, in the information governance toolkit, indicates that it maintains a high level of security over information and data security.

4.4. Feed into the Statement on Internal Control

The arrangements for managing Echogenicity's risks through the assurance framework enable the Chief Executive focus on the key risks facing Echogenicity to gain assurance that the risks are being mitigated, or insured against effectively. Assurances are reviewed annually with the IG toolkit is completed. Overall, the assurance framework provides Echogenicity with a comprehensive record of the adequacy of Echogenicity's arrangements for managing the key risks it faces.

4.5. Relationship with external stakeholders

Externally Echogenicity participates with key stakeholders, solely with Kernow CCG, to ensure contract performance and related risks are effectively managed.

The Group's key objectives are to monitor delivery of: activity set out in the Service Level Agreement (SLA) between the PCT and Echogenicity performance targets identified in the SLA quality standards set out in the SLA Echogenicity's.

4.7. Compliance with Pension Scheme Regulations

Echogenicity is a private company and as such has a legal responsibility to provide a pension for all of its staff from February 2017.

This includes ensuring that deductions from salary, employer's contributions and payments in to the Scheme are in accordance with the Scheme Rules.

4.8. Compliance with equality, diversity and human rights legislation

Control measures are in place to ensure that all Echogenicity's obligations under equality, diversity and human rights legislation are complied with.

5. Review of Effectiveness

As Chief Executive, I have responsibility for reviewing the effectiveness of the system of internal control. My review is informed in a number of ways. All measures are reviewed on an annual basis when the IG toolkit is completed. Assurance is gained through the Assurance Framework and on the controls reviewed as part of the internal audit work. The Chief Executive has the responsibility for the development and maintenance

Scanning Cornwall's Hearts

of the system of internal control. The Assurance Framework itself provides me with evidence that the effectiveness of controls that manage the risks to the organisation achieving its principal objectives have been reviewed. My review is also informed by: audit reports from external and internal audit including the information governance toolkit; NHSLA. A plan to address weaknesses and ensure continuous improvement of the system is in

place. The updated plan is shown at the end of this Statement. The assurance framework provides me with evidence of the effectiveness of the actions taken to address risks to Echogenicity its annual plan. The Chief Executive ensures that local risk assurance registers are reviewed and challenged on a regular basis. Key risks from these reviews are included in the assurance framework.

5.1.2. Standards for Better Health

Reportable incidents

Echogenicity has had no reportable incidents during the year.

All flows of Personal Identifiable Data are secure or risks mitigated; Yes

All information governance standards as specified by the review are being met

Yes

An Information Governance Toolkit assessment has been completed

Yes

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