

Appendix 1

GLOSSARY

Acceptable Risk: The maximum score associated with a specific risk that the Trust is willing to tolerate.

Accident: An unintended event or series of events that result in death, injury, loss or environmental damage.

Adverse Event: An undesired outcome that may or may not be the result of error.

Annual Health Check: The Healthcare Commission performance management framework incorporating targets and standards for quality and use of resources.

Board Assurance Framework: A register of significant risks mapped to the principal objectives and monitored by the Trust Board

Consequence: Outcome or impact of an event.

Control: An existing process, policy, device, practice, barrier or other action or device that acts to minimise negative risk and enhance positive opportunities.

Corporate Risk Register: A scored list of clinical, organisational, financial and strategic risks to the organisation, identified by the Executive Directors, by sub-committees of the Board or by processes of assurance. Controls and assurances in relation to these risks are also set out in the corporate Risk Register.

Hazard: A source of potential harm.

Incident: An incident is any occurrence which gives rise to, (or, in the case of a near miss narrowly avoids giving rise to), unexpected or unwanted effects involving the safety or well being of any person on Trust premises or employed by the Trust. It also refers to the loss of or damage to property, records or equipment that is on Trust premises or belongs to the Trust. The term therefore includes accidents, clinical incidents, security and confidentiality breaches, violence, and any other category of event, which does or could result in harm. It also includes failures of medical or other equipment.

Likelihood: Used as a general description of probability or frequency.

Probability: The likelihood of a specified event or outcome occurring. This is measured by the ratio of specific events or outcomes to the total number of possible events or outcomes. Probability is expressed along a scale ranging from 'rare' to 'almost certain'

Residual Risk: Risk remaining after implementation of risk treatment.

Risk: The likelihood that an adverse outcome will arise from a given situation.

Risk Acceptance: An informed decision to accept the identified consequences and likelihood of a particular risk.

Risk Analysis: A systematic process to understand the nature of, and deduce the level of, risk.

Risk Assessment: The overall process of risk identification, risk analysis and risk evaluation.

Risk Avoidance: A decision not to become involved in, or to withdraw from, a risk situation.

Risk Criteria: Terms of reference by which the significance of risk is assessed.

Risk Evaluation: Process of comparing the level of risk against risk criteria.

Risk Exposure: The level of risk that an organisation or process or project is exposed to.

Risk Identification: This is the process of determining what, where, when, why and how something could happen.

Risk Management: The culture, processes and structures that an organisation applies in order to realise potential opportunities, whilst managing adverse effects.

Risk Management Process: The systematic application of communicating, establishing the context, identifying, analysing, evaluating, treating, monitoring and reviewing risk.

Risk Reduction: Actions taken to lessen the likelihood, negative consequences or both associated with risk.

Risk Treatment: Process of selection and implementation of measures to modify risk (avoiding, modifying, sharing and retaining).

Service User: A person who is using services provided by the Trust.

Stakeholders: Those people and organisations who may affect, be affected by, or perceive themselves to be affected by a decision, activity or risk.

The Trust: East London NHS Foundation Trust