OP09

Corporate Policy and Framework
for the Governance of Partnership Agreements

Contents

1. Introduction

The Trust aspires to the highest standards of corporate behaviour and clinical competence to ensure that safe, fair, and equitable procedures are applied to all organisational transactions, including relationships with patients, their carers, the public, staff, stakeholders, and the use of public resources. In order to provide clear and consistent guidance, the Trust will develop documents to fulfil all statutory, organisational, and best practice requirements and support the principles of equal opportunity for all.

This policy and framework are intended to ensure effective arrangements are put in place for the governance of partnerships.

1.1 Status

This is a corporate policy.

1.2 Purpose and scope

The increasing development of partnership-based approaches places further emphasis on the necessity for strong governance and (where appropriate) performance management in partnership working arrangements. In this respect, there needs to be a clear approach to ensure and demonstrate that investment in partnerships delivers effective and appropriate outcomes for the local population.

The review and evaluation of partnership working necessitates it being part of regular management arrangements. This is so there is on-going consideration of the effectiveness by individual participants and managers at the appropriate levels. This policy and framework has been developed in order to ensure that there is a consistent approach, and to provide assistance in managing and governing partnerships.

2. Register, Definitions

It is not the intention to assess through this policy and framework every 'partnership' type activity that the organisation engages in. The definition will identify those partnerships, which, as a minimum, will be recorded in the Trust Partnership Register.

Definition

A partnership is an agreement to work collectively between two or more independent bodies to achieve a common objective. Examples are given in the table.

Formal forums	A forum provides a medium for discussion and debate with a key role in shaping strategy and service delivery.
Joint working arrangements	Whereby two or more organisations combine resources to achieve economies of scale or improved commercial bargaining power.
Management committees	Steering groups working together to support a particular project/organisation.
Local Strategic Partnerships	Partnerships required or covered by law, e.g., Community Safety Partnerships, NHS and local authority joint working involving pooled budgets, lead/joint commissioning, or integrated service provision etc.
Collaborative working arrangements	Involving Trusts where a service or project is delivered through a not-for-profit or commercial organisation, e.g., a Trust or Charity limited by guarantee.

2.1 Not a partnership

- Internal groups where the Trust controls budgets or decision making.
- Informal groups to discuss specific topics.
- Appointments/financial commitments to outside bodies where the Trust has no strategic or policy function, e.g. grants to charities or projects, members appointed to organisations in an advisory capacity etc.
- Private Finance Initiative (PFI) or other commercial arrangements.
- Contracts or service level agreements or similar arrangements where one organisation pays another to deliver goods or services - existing procurement and contract management mechanisms will ensure effectiveness.
- Other arrangements where there is no reputational or financial risk to the Trust.

3. Framework for Partnership Governance
3.1 Establishing a new partnership or reviewing an existing partnership

The purpose is to ensure that any joint working arrangements, which potentially bring a high level of financial or reputation risk to the organisation, are evaluated, assessed, and recorded (the level of risk is defined by the 5x5 risk matrix). This approach enables the appropriate performance management, good governance, and risk control measures to be put in place. This includes ensuring that the organisation meets its duties where it is required to work in partnership or within a partnership arrangement by virtue of a statutory requirement.

Joint working arrangements where risk is already well controlled through contracts, service level agreements, or other types of formal agreement or where the organisation effectively controls the relationship in other ways, e.g., makes the final decision on what activities it will fund, are **not** included on the partnership register.

When planning to establish a new partnership or when reviewing an existing partnership, lead managers must:

- Refer to the definitions, exclusions and characteristics set out in Section 2.1, bearing in mind the purpose of developing the register outlined in section 1.
- Use the standard risk assessment tool Attachment 3 of OP10, Risk Management and Patient Safety Reporting Policy to assess the risk of the partnership to the corporate objectives.
- Significant risks of the corporate objectives must be identified and reviewed as part of the Trust's risk register.

3.2 Significant partnership

The partnership and governance framework with the Trust's Risk Management Policy facilitates the assessment of the risks of the partnership to the organisation. The identification of the level of risk to the Trust's corporate objectives provides an indication of the level of liability as a result of any serious failures within the partnership (See Appendix 2).

It is the responsibility of the Chief Officer (or a Chief Officer (Executive Director) nominated by the Chief Executive) to ensure that a full assessment of the risks regarding the partnership are identified and recorded on the Trust risk register if required (See section 3.8).

All significant (agreements between the Trust as a sovereign organisation and at least one other equivalent organisation) partnerships should be recorded on the **Partnership Register**. The register requires the setting of a review date to reassess the partnership, in a year's time or less if there is likely to be a change in circumstances necessitating further review.

The register of partnerships is held by the Group Company Secretary. It is the responsibility of the Lead Director to ensure that the Partnership Registration Form is completed (Appendix 1). This should include setting a review date to reassess the partnership.

3.3   Review

The responsible lead partnership manager must ensure the details of the partnership are provided to the Trust's Group Company Secretary to ensure the Partnership Register is completed. The review of partnerships should take place annually, or more frequently if there is likely to be a change in circumstances necessitating further review.

3.4   Risk management

The risk management process for partnerships is based on an assessment of the risks to the organisation achieving the corporate objectives using the guidance (Appendix 2) and the risk matrix (Attachment 3 of OP10, Risk Management and Patient Safety Reporting Policy). The process should be used when managers are reviewing an existing partnership or seeking to establish a new partnership.

Lead directors will be responsible for ensuring those risks arising from partnerships hosted by the Trust are recorded on the Trust's risk register when required, in accordance with the Trust's risk management policy. Risk registers will be reviewed monthly (see OP10, Risk Management and Patient Safety Reporting Policy section 4.6 – Analysis of Risk Management) and lead directors will liaise with the Group Company Secretary in order to raise issues and receive feedback.

3.5   The Partnership Register

The purpose of the register is to record key details of partnerships, so that the organisation can demonstrate awareness of its key commitments. An annual review date (or sooner, subject to the timescale in the case of each agreement) needs to be agreed for each partnership.

After completing the registration form, or agreeing the organisation's participation in a new partnership, lead managers should ensure the Partnership Register is updated with the relevant details.

3.6   Strategic planning and partnerships

Effective links will be maintained between partnership governance and planning. This policy will be applied where the planning process identifies the need to establish a partnership. Lead partnership managers will be involved from the outset in the setting up of new partnerships. Confirmation must be gained by agreement with the Executive Directors.

3.7   Exiting a partnership

There are a number of reasons why either the Trust or a partner would consider leaving an existing partnership. The decision to exit could be for a number of reasons including: changes to the organisations strategic aims and priorities, the effectiveness of the partnership, duplication, or if it was felt that a partnership was not committed to the values and principles of the partnership e.g. equality and diversity. The reasons for exit will need to be recorded on the Partnership Register. Any exit must ensure that any exchange of information or data or access to such under the partnership agreement is immediately ceased and any data is destroyed or deleted as per the partnership agreement exit requirements.

3.8 Duties and Responsibilities

Approval and governance	Proposed Partnership Agreements are reviewed and recommended for approval by the Trust Management Committee to the Trust Board. The Trust Board is the approving body. The Trust Board will delegate the oversight of the Partnership Agreement to an appropriate Committee of the Board. The delegated Committee has oversight and governance of the Agreement and its review in line with the Agreement. The Audit Committee has oversight of the Committee governance.
Chief Executive	The CEO has overall responsibility for the strategic direction and operational management, including ensuring that Trust process documents comply with all legal, statutory and good practice guidance requirements.
Lead Director	Directors who lead a partnership on behalf of the Trust are responsible for the following. • Ensuring that the partnership register is completed. • Ensuring that the appropriate notification form for partnerships under the NHS Act 2006, known as section 75, 256 and 76, is completed and submitted to the Department of Health and updated on an annual basis. This would be undertaken with assistance from colleagues in finance. • Ensuring reporting of partnership activities within the Trust to demonstrate, effective use of resources and outcomes. • Ensuring partnership governance arrangements are reviewed at least annually. • Ensuring any partnership risk is incorporated into the corporate risk register with the appropriate risk grading.
Group Company Secretary	Responsible for this policy, maintenance and updating of any relevant information relating to the document or appendices. Provide support to directors and lead partnership managers on application of policy. To review and maintain the partnership register.
All Staff	All staff, including temporary and agency staff, are responsible for the following. • Compliance with relevant process documents. Failure to comply may result in disciplinary action being taken. • Co-operating with the development and implementation of policies and procedures and as part of their normal duties and responsibilities. • Identifying the need for a change in policy or procedure as a result of becoming aware of changes in practice, changes to statutory requirements, revised professional or clinical standards and local/national directives, and advising their line manager accordingly. • Identifying training needs in respect of policies and procedures and bringing them to the attention of their line manager. • Attending training / awareness sessions when provided.

4. Implementation

4.1 This policy will be available to all Staff for use for use in the circumstances described on the title page.

4.2 All managers are responsible for ensuring that relevant staff within the Trust have read and understood this document and are competent to carry out their duties in accordance with the procedures described.

5. Documentation
5.1 Other related policy documents
OP10, Risk Management and Patient Safety Reporting Policy

5.2 Legislation and statutory requirements
Data Protection Act 2018
Records Management Code of Practice for Health and Social Care 2016

5.3 Best practice recommendations

Audit Commission, A Fruitful Partnership, effective partnership working, 1998. Audit Commission, Governing Partnerships, bridging the accountability gap, 2005.
Audit Commission, Comprehensive Area Assessment Framework, 2009 CIPFA report, Sterling Work, 2001

6. Monitoring, Review and Archiving
6.1 Monitoring

The Trust Board have agreed the method for monitoring the dissemination of this policy will be via publication on the Trust Intranet, inclusion in the Trust Briefs.

6.2 Review

6.2.1 The Trust Board will ensure that this policy document is reviewed in accordance with the timescale specified at the time of approval. No policy or procedure will remain operational for a period exceeding three years without a review taking place.

6.2.2 Staff who become aware of any change which may affect a policy should advise their line manager as soon as possible. The Trust Board will then consider the need to review the policy or procedure outside of the agreed timescale for revision.

6.2.3 For ease of reference for reviewers or approval bodies, changes should be noted in the 'document history' table on the front page of this document.

NB: if the review consists of a change to an appendix or procedure document, approval may be given by the sponsor director and a revised document may be issued. Review to the main body of the policy must always follow the original approval process.

6.3 Archiving

The Trust Board will ensure that archived copies of superseded policy documents are retained in accordance with Records Management: NHS Code of Practice 2009.

7.0 Financial Risk Assessment

1	Does the implementation of this policy require any additional Capital resources	No
2	Does the implementation of this policy require additional revenue resources	No
3	Does the implementation of this policy require additional manpower	No
4	Does the implementation of this policy release any manpower costs through a change in practice	No
5	Are there additional staff training costs associated with implementing this policy which cannot be delivered through current training programmes or allocated training times for staff.	No

8.0 Equality Impact Assessment

An initial equality analysis has been carried out and it indicates that there is no likely adverse impact in relation to Personal Protected Characteristics as defined by the Equality Act 2010.

An equality analysis has been carried out and it indicates that:

Tick	Options
√	A. There is no impact in relation to Personal Protected Characteristics as defined by the Equality Act 2010.

9.0   Maintenance

The Group Company Secretary will hold the register and update the Policy.

10.0   Communication and Training

Circulation to Executive Directors responsible for negotiating Partnership Agreements.

11.0   Audit Process

Criterion	Lead	Monitoring method	Frequency	Committee
All Partnership Agreements follow the process described and are place approved on the Register	Co Sec	Annual comparison of Register and approved Partnership Agreements	Annually	Trust Board

12.0   References

Part A - Document Control

Policy number and Policy version: OP09 Version 3.0	Policy Title Corporate Policy and Framework for the Governance of Partnership Agreements	Status: Final		Author: **Group Company Secretary** **Director Sponsor:** **Chief Nurse**
Version / Amendment History	Version	Date	Author	Reason
	Version 1.0	May 2021	Company Secretary	Implementation of policy
	Version 1.1	June 2021	Company Secretary	Update to section 6.2 - Legislation and statutory requirements
	Version 1.2	April 2022	Company Secretary	Extension applied
	Version 2.0	October 2022	Company Secretary	Review of policy
	Version 3.0	July 2023	Group Company Secretary	Review of Policy

Intended Recipients: Trust Board	
Consultation Group / Role Titles and Date: Trust Board	
Name and date of Trust level group where reviewed	Trust Policy Group – November 2023 Trust Management Committee – November 2023
Name and date of final approval committee	TMC – November 2023
Date of Policy issue	November 2023
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Training and Dissemination: Circulation to key senior staff	
Publishing Requirements: Can this document be published on the Trust's public page: **Yes** **If yes you must ensure that you have read and have fully considered it meets the requirements outlined in sections 1.9, 3.7 and 3.9 of OP01, Governance of Trust-wide Strategy/Policy/Procedure/Guidelines and Local Procedure and Guidelines, as well as considering any redactions that will be required prior to publication.**	
To be read in conjunction with: draft Partnership Agreements	
Initial Equality Impact Assessment (all policies):　　　**Completed Yes** **Full Impact assessment required: No**	
Monitoring arrangements and Committee	Trust Board, Annually
Document summary/key issues covered. Partnership Agreements	
Key words for intranet searching purposes	Partnership Agreements, Partnerships
High Risk Policy?	No

NHS
The Royal Wolverhampton
NHS Trust

Partnership Registration Form

The Partnership Register is a centralised record of partnerships in which the Trust participates and which fit the **definition of partnerships**, which the organisation has adopted.

The responsible lead partnership manager should complete the registration form whenever the organisation agrees to become involved in a new partnership arrangement or whenever a review of an existing partnership has been carried out, using the **self-assessment guidance (Appendix 2)**. For a new partnership it may not be possible to complete all sections of the form, but a review date (within 12 months) should be set for a full assessment to be carried out. Proposed partnerships will be presented to Trust Management Committee for initial agreement confirmation and a report of existing partnerships is provided to the Audit Committee annually.

The relevant column should be completed when a decision has been taken to **exit an existing partnership.**

For further help and information, please contact the Group Company Secretary or Group Chief Strategy Officer.

Partnership Registration Form
Complete this section for new and existing partnerships, in which the organisation participates or intends to participate. Please use guidance in Appendix 2.

Service(s) involved	
Agreement type	
Organisations Involved	
Any value to RWT (if known)*	
Review date	
Approved (Trust Committee and date)	
Lead Officer	
Exit date/reason	

*Value may include resources 'in kind'

Self-Assessment Guidance

Working through the self-assessment will help you to quickly identify areas of concern about the effectiveness and governance of the partnership, which may bring a level of risk to the organisation if not addressed. Consider sections 1 to 7 which should help you to be aware of relevant issues, when you come to look at the risk assessment element at Section 8.

1   Partnership Details
a)   Why is this partnership needed?
b)   Are there clear and achievable aims and objectives?
c)   How do these contribute to the organisation's strategic aims, 10 health outcomes or directorate objectives?
d)   What is the rationale/expected added value of working in partnership,
      e.g. better co-ordinated service delivery across agencies, improved outcomes on crosscutting issues, accessing resources, meeting a statutory requirement etc.

1.1   The need for a new partnership arrangement should be tested to ensure that:
a)   The proposed remit of the partnership is not already being carried out elsewhere;
b)   The proposed objectives fit with the organisation's strategic aims;
c)   A partnership arrangement is the most effective way to achieve desired outcomes and will achieve added value.
d)   It is the responsibility of the lead manager and the responsible director to ensure these tests have been applied.

In relation to point 1.1c the Audit Commission offer the following guidance.
Questions to ask before setting up a partnership
- Is the problem that the prospective partners want to solve one that needs a partnership approach?
- Do the prospective partners have a clear and shared vision of the benefits that the partnership is intended to achieve?
- Is this vision realistic in the light of:
    - the resources and opportunities likely to be open to the proposed partnership and
    - the issues that partnership working is particularly suited to address?
- Will the anticipated benefits outweigh the likely costs (direct and indirect) of a partnership?
- Will the benefits and costs be measured?
- Could the benefits be achieved in a simpler or more cost-effective way?
- Are the partners all willing to devote the necessary time and effort to make the partnership a success?
- Do the partners all know what role they will play, what resources they will contribute and how they will account for the success of the project?
- Are the partners willing to consider changing their other activities to fit in with the partnership's objectives, where this is appropriate?

Factors indicating that a partnership is not the best approach
- The answer to one or more of the questions above is 'no';
- The topic proposed is primarily the responsibility of one agency with others having only a marginal interest or role;
- Agencies have no shared objective in relation to this topic;
- Agencies' main aim is to achieve cost savings;
- Agencies have a history of poor relationships and have not made a commitment to change this; and
- Agencies want to shunt costs or blame for problems onto one another – that is, there is a hidden negative agenda.

Exiting a Partnership
There may be a number of reasons why the organisation would consider leaving an existing partnership, but in essence such a decision should flow from whether the aims of the partnership remain consistent with the organisation's strategic aims and priorities and the partnership is effective in delivering its aims. There may also be issues of duplication across partnerships, where amalgamation or development of revised remits should be considered. If it was felt that a partnership was not committed to the principles of equality and diversity, then this would also be an appropriate reason for withdrawal. An assessment of the risks involved should be undertaken to help identify the impact of withdrawal so that any implications can be addressed.

If withdrawal is a likely option:
- The organisations strategic aims and priorities (see Appendix 3) would be the main point of reference in the rationale for withdrawal;
- Consider whether there are any legal, financial, service delivery or reputational implications for the organisation;
- Consider the impact of disengagement on other partners;
- Consult with the board and management group members;
- Discuss and agree the decision with the relevant director for formal signature;
- Amend the partnership register to show the date of withdrawal and reasons.
- Provision and description within the partnership agreement for the removal of access to and destruction or deletion of any data or information shared.

2   Governance arrangements - protocols for sharing information between partners and information governance
2.1   For the partnership itself:
The Audit Commission define corporate governance as 'the framework of accountability to users, stakeholders and the wider community, within which organisations take decisions, and lead and control their functions, to achieve their objectives.' The following questions should help clarify whether adequate governance arrangements are in place:
a)   Who leads the partnership?
b)   Does the partnership have any legal status e.g. is it a charity, limited or public company or a statutory partnership?
c)   If it does not have legal status, is there a constitution, formal written agreement or other formal document which sets out:
- How decisions are made?
- How they are recorded?
- Who makes sure they are acted upon?
- Who scrutinises them?
- To whom are they reported?
- How conflicts between partners are resolved?
- Where applicable, a complaints handling protocol in line with the NHS complaints handling regulations.

2.2   There must be a formal partnership agreement in place for any partnership, in which the organisation participates. This could take the form of terms of reference, a memorandum of understanding, partnership agreement, constitution, etc. Such an agreement should cover the issues detailed above as a minimum and be formally signed off by the Trust by a director, or the board, depending to delegated limits. If this is not the case the organisation's representative on the partnership should raise the issue with partners and negotiate the development of an appropriate agreement.

2.3   Areas to consider for inclusion for formal partnership agreement or terms of reference are:
- applying prime financial policies and financial policies;
- the provision of internal audit;

- HR support and legal advice;
- ensuring data quality in partnership data;
- financial monitoring;
- access to data and information by partners.
- benefits outcomes and achievements.
- Consideration must be given to any potential impact on any of the following and appropriate provision clarified and agreed:
    - Any impact on CQC registration.
    - Any impact on Health & Safety of staff, patients and visitors?
    - Any impact in respect of lability for claims?
    - Any potential requirement for incident reporting and/or investigation.
    - Any potential impact on Trust structures.
    - Any potential transfer of 'appropriate' service risks.
    - Any potential requirement for access to wider Trust systems.
    - Any potential reporting/assurance framework of partnership.
    - Any potential pathway updates/local policy guideline updates to incorporate new service/location.
    - Any impact on the implementation and use of NICE/National Guidance.
    - Any potential information governance considerations e.g., processing/sharing/assets etc.
    - Any potential impact on financial resources.
    - Any potential impact on Nationally reported data.

2.4 Links to the Trust's governance arrangements

Where partnerships are not corporate entities in their own right, their governance arrangements are unlikely to be as robust as those of individual partners. It is important therefore that participating organisations link their own governance processes to those of the partnership. The following questions will help assess whether these links are adequate for the organisation's involvement in the partnership in question. It may be helpful to refer to the standing orders, scheme of delegation and reservation and standing financial instructions and to bear in mind the following points:

- Members on the Trust Board should not be expected to make commitments on behalf of the organisation unless this is undertaken within the context of board meetings – directors and direct reports should carry out this role;
- Directors and direct reports have the authority to make such commitments, within limits set by the scheme of delegation and reservation, standing financial instructions and in accordance with standing orders. They may also delegate this authority to other managers;
- Key decisions need to reported back to the organisation at the appropriate level – this may be to the relevant directorate, management group and/or board or audit committee:
    a. Does the organisation's involvement in the partnership need Trust Board approval?
    b. Does the organisation's representative on the partnership have the authority to make commitments on the organisation's behalf?
    c. What are the limits to that authority?
    d. Are there arrangements in place to report back to the organisation on the decisions of the partnership, which impact on the organisation, or to scrutinise them?
    e. Is there a written commitment or other evidence of the partnership's commitment to the principles of equality and diversity in relation to its work and behaviours?

3 Serving the local public and patients

a) Is there a two-way communications process between the public, patients and the partnership?
- Is there a newsletter, or section on the organisation's website explaining what the partnership does and reporting progress? Is there a feedback system for the public or patients to comment? Are papers publicly available? Are meetings open to the public or patients? Can

members of the public or patients ask questions or raise agenda items at meetings?
b)   How can the public and service users obtain redress if things go wrong?
c)   Is there a complaints and suggestions process the public can use?

4   Performance management and data quality
4.1   For the partnership as a whole:
a)   How do you know which partnership targets are being met and which are not?
b)   Does the partnership may have a specific performance management framework
     and how can the data be accessed? If not, you need to ask the following questions:
   - Are there agreed performance measures in place to track achievement against partnership objectives?
   - Are challenging targets set year on year?
   - Who manages and reports progress?
   - Is performance monitored on a regular basis?
   - Is there a process in place to assess the quality of data used in performance reporting?

4.2   For the organisation's involvement in the partnership:
a)   Are there performance measures in place for the organisation's own monitoring of its involvement with the partnership and how are these reported?
b)   In other words, are there ways of knowing if the organisation's involvement is effective in terms of delivering on outcomes it is responsible for and contributing to shared outcomes.

5   Financial management
5.1   A notification form for certain partnership arrangements under the NHS Act 2006 known as section 75, 256 and 76 need to be completed and reported to the Department of Health and updated on an annual basis. The lead manager responsible for the partnership should ensure that this requirement is met, if required.

a)   Which organisation is the accountable body?
b)   Are there financial monitoring and reporting systems in place and who manages them?
c)   What resources does the organisation contribute to the partnership, including estimated management time?
d)   Are total resources available to the partnership (including contributions made by other partners as well as the Trust), as well as utilisation of those resources, monitored and reported on?
e)   Is there any means to evidence that the organisation's strategic aims and priorities are being met in a cost-effective way through the partnership?

5.2   CIPFA's report, Sterling Work, 2001 suggests the following questions may assist with value for money analysis of partnership working, while recognising that this can be difficult to assess and quantify.
a)   Is there any objective reporting by the partnership of costs compared to tangible outputs achieved? Is there any comparative information from similar partnerships?
b)   Has there been any objective exercise carried out with respect to the overall 'health' of the partnership?
c)   Is there evidence that the partnership has achieved benefits in either delivery or policy focus that would not have come about without synergy and co-operation of the agencies involved?
d)   Is there evidence that partners' objectives, priorities etc. have been positively influenced by the partnership?
e)   Are there financial monitoring and reporting systems in place within the organisation in relation to the partnership? Involvement needs to be conducted in accordance with financial regulations as set out in the scheme of delegation and standing financial instructions.
f)   Are there any insurance requirements?
g)   Has the need for internal or external audit arrangements been considered?

6   Monitoring arrangements
a)   What arrangements are in place to periodically review the partnership governance arrangements?

b)   How will the outcome of monitoring activity be reported?

7   Termination arrangements
a)   What arrangements are in place, should the partnership come to an end?
b)   Is there financial, legal, service delivery or reputational implications for the organisation?
c)   Is it clear how resources or liabilities will be allocated back to partners?
d)   If, as a result of carrying out this assessment a view arises that the organisation should consider withdrawing from the partnership then the process detailed at 1.2 (above) should be applied.

8   Risk management
It is important to have some means of assessing when things may be going wrong in a partnership arrangement, especially when this may bring a level of risk to the organisation. The matrix below sets out the scoring system to help identify the levels of risk across a range of criteria. The self-assessment process should help identify potential risk areas, for example, if governance or performance management arrangements are unclear or underdeveloped then this might lead to difficulties for the partnership, which could also adversely affect the organisation.

High levels of risk need to be recorded on the organisation's risk register, with the identification of the controls and assurances mitigate the risk. Further guidance on the risk assessment process and suggested ways of reducing and providing assurance on risk are detailed within the organisations risk management policy.

The growth in partnership working means that organisations face increased financial, legal and reputational risk if problems arise. The Audit Commission have highlighted cases where things have gone wrong which has resulted a significant loss of public funds or reputation. Therefore, it is essential to determine the risks to the organisation of participating in existing partnerships. This will provide benefits not only for the organisation, but also for the partners, as it will increase the probability that the partnership will be successful in delivering its objectives, both by proactively addressing identified risks, and by supporting decision-making processes, which can be less clear in partnerships than in corporate bodies.

Risk Assessment Matrix

Consequence	Likelihood				
	Rare 1	Unlikely 2	Possible 3	Likely 4	Almost certain 5
5 Catastrophic	5	10	15	20	25
4 Major	4	8	12	16	20
3 Moderate	3	6	9	12	15
2 Minor	2	4	6	8	10
1 Negligible	1	2	3	4	5

The Royal Wolverhampton NHS Trust

Partnership Agreement reviewed at TMC

Partnership agreed At Trust Board

Required Partnership Agreement identified

Partnership Agreement details recorded (Appendix 1)

Details of Partnership added to Partnership Register

Partnership Agreement Risk Assessed

Partnership details forwarded to Group Company Secretary

Risk added to Risk Register (where necessary)