



THE UNITED REPUBLIC OF TANZANIA

**MINISTRY OF HEALTH, COMMUNITY
DEVELOPMENT, GENDER, ELDERLY AND CHILDREN**

NATIONAL BLOOD TRANSFUSION SERVICE



RISK MANAGEMENT FRAMEWORK

**Version 1.0
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REVISION HISTORY

Document control #	Version Number	Date	Revision details	Reason for Revision
NBTS/RM 16	1.0	December 2019	New	NA

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DEFINITION OF TERMS

Control: Any action taken by management and other parties to manage risk and increase the likelihood that established objectives and goals will be achieved.

Impact: The degree of loss or damage that would result from an occurrence of the risk event.

Inherent Risk: Probability of loss arising out of circumstances or existing in an environment.

Likelihood: A chance of something happening, whether defined, measured or determined objectively or subjectively, qualitatively or quantitatively, and described using general terms or mathematically

Residual Risk: It is the risk remaining after risk treatment. It is also known as “retained risk”.

Risk Analysis: Is defined as the systematic process applied to determine the likelihood and impact on occurrence. It provides the basis for risk evaluation and decisions about risk treatment.

Risk Appetite: The amount of risk that an organization is prepared to accept (tolerate) or be exposed to at any point in time.

Risk Management Framework: Set of components that provide the foundations and organizational arrangements for designing, implementing, monitoring, reviewing and continually improving risk management throughout the organization.

Risk Management: Is a process of identifying, assessing, managing, and controlling potential events or situations to provide reasonable assurance regarding the achievement of organization’s objectives.

Risk Management Plan: Is a document prepared to show how risk management programs of an organization will be implemented over a given period of time e.g. one year

Risk Owner: The Senior Official responsible for the area that the risk will impact on most or that has been assigned the responsibility for the risk by his/her supervisor.

Risk Register: A composite, prioritized, list of the identified and evaluated risks outlining their likelihood and potential impact, and includes action plan or proposed mitigating measures to manage or contain a risk to acceptable levels.

Risk Tolerance: An organization or stakeholder's readiness to bear the risk after the risk has been treated, to achieve the organization's or stakeholder's objectives.

Risk Treatment: It is the process of selection and implementation of measures to modify risk.

Risk: The possibility of an event occurring that will have an impact on the achievement of objectives. Risk is measured in terms of impact and likelihood.

1.0 INTRODUCTION

National Blood Transfusion Service (NBTS) is program under the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC). It is mandated with overseeing blood safety activities in Tanzania. Specific functions include recruitment and sensitization of voluntary non-remunerated blood donors (VNRBDs), collection of blood, transportation, storage, processing, screening/testing and distribution to transfusing facilities. In accomplishing its roles, NBTS works with various stakeholders like President's Office, Regional Administration and Local Government (PO-RALG), Tanzania Red Cross Society (TRCS), Zonal and National Referral hospitals.

NBTS risk management framework covers all its areas of its operations. The framework is applicable to NBTS and its network.

This documents lays down risk management processes and procedures applicable to NBTS operational sections and strategic objectives. This is the main guiding document for managing all program risks. Members of staff are obliged to abide by the procedures detailed in this document.

This plan addresses the following procedures:

- Risk Identification
- Risk Assessment
- Risk Mitigation
- Risk Tracking and Reporting

2. RISK MANAGEMENT POLICY

2.1 Purpose of the Risk Management Plan

This Risk Management Plan defines how risks associated with the National Blood Transfusion Service (NBTS) operations are identified, analyzed, and managed. It outlines how risk management activities are performed, recorded, and monitored throughout the transfusion chain. The key purpose of risk management is to enable NBTS to anticipate and respond to current and emergent threats through identification, assessment and monitoring of risks.

The Risk Management Plan is developed by the NBTS members of staff and authorized by the Program Manager and is monitored and updated throughout the implementation of activities.

The intended audience of this document is the NBTS team, NBTS network, Program sponsors, suppliers and NBTS customers ranging from blood donors to transfusing facilities.

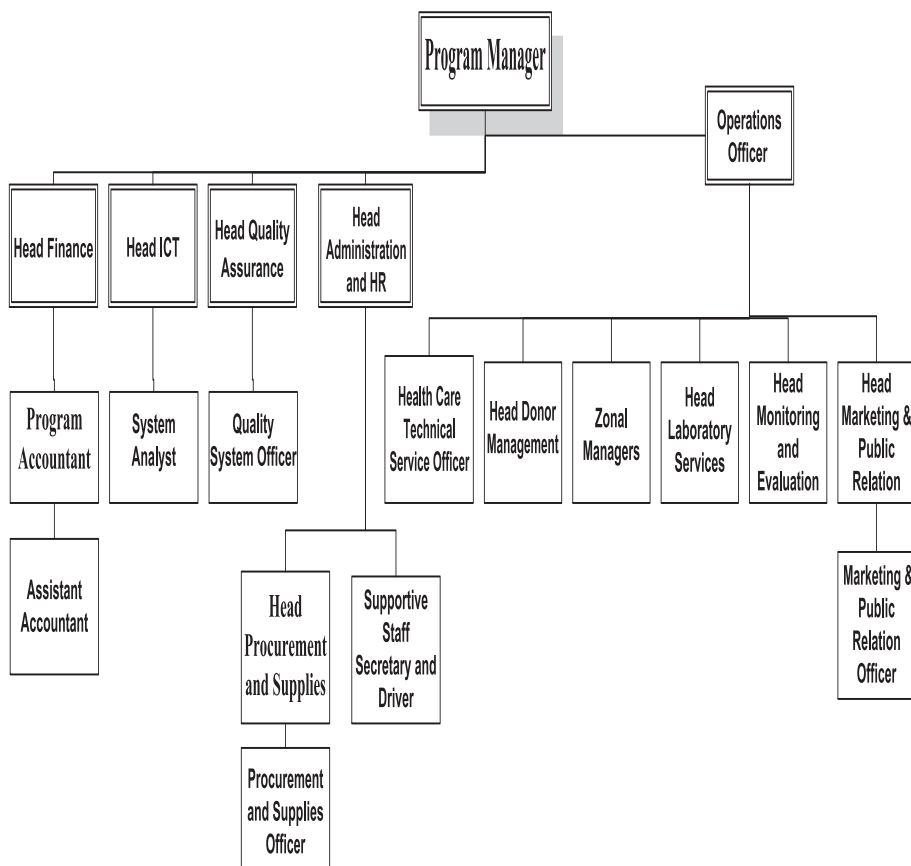
2.2 Policy Statement

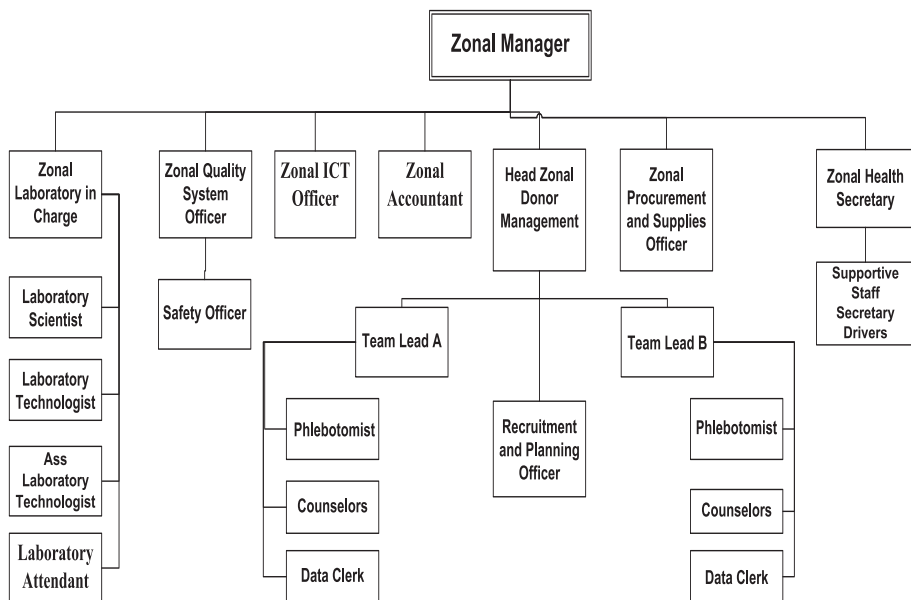
The NBTS values the safety of its staff, donors and other visitors to its premises. To ensure safety, the NBTS provides suitable environment and condition for the activities performed. The premises are adequate in size, well ventilated, adequately lit and do not invalidate or adversely affect operations. NBTS assesses and mitigates any safety risks within the facilities. All potential hazards are registered for monitoring their occurrences and recurrences.

3. RISK MANAGEMENT GOVERNANCE STRUCTURE

The National Blood Transfusion Service is organized such that there is the main office at the headquarters and zonal offices. NBTS is headed by the Program Manager (Figure 1). Zonal centres are headed by Zonal Managers. The Program Manager is ultimately responsible for the management of risks within NBTS. The Head of Quality Assurance is responsible for coordination of Risk Management matters within NBTS. Zonal Managers are responsible for the management of risks within their zones. Safety Officers are responsible for coordination of risk management activities in the NBTS zones.

Figure 1: NBTS Organization Structure





4.0 RISK MANAGEMENT PROCESS

The Head of Quality Assurance, working with the NBTS team, and other stakeholders ensure that risks actively identified, analyzed, and managed throughout NBTS operations. Risks are identified as early as possible in the Program so as to minimize their impact. The steps in identifying, analyzing and managing risks are outlined in sections below.

4.1 RISK IDENTIFICATION

Risk identification is the process of determining what, where, when, why, and how something could happen. The objective of risk identification is to generate a comprehensive list of risks based on those events and circumstances that might enhance, prevent, degrade or delay the achievement of the objectives. Risk identification involves the NBTS team and appropriate stakeholders. Risks will be identified based on sections and objectives outlined in the strategic plan.

Team-Based Brainstorming risk identification approach will be employed. This is a convenient practice of brainstorming which helps identify risks. It is a preferred approach as it encourages commitment, considers different

perspectives and incorporates different experiences.

The team identifies risks according to sections being dealt with (e.g. strategic level only, departmental, or operational). Each identified risk is documented in a “Risk Identification and Analysis Sheet”. Each risk should have its own sheet, which is later summarized into a Risk Register

4.2 RISK ANALYSIS

Risk analysis is a systematic process of understanding the nature of risk and determining the level of risk. All risks identified are assessed to identify the range of possible Program outcomes.

The following guidance should be considered in risk analysis:

4.2.1 Identify and evaluate existing controls

When assessing a risk, it is important to identify what controls (and weaknesses) are in place to mitigate the risk.

4.2.2 Determine risk likelihood and impact

The magnitude of the consequences of an event, should it occur, and the likelihood of the event and its associated consequences, should be assessed in the context of the effectiveness of the existing strategies and controls. Where no reliable or relevant past data is available, subjective estimates may be made which reflect an individual’s or group’s degree of belief that a particular event or outcome will occur. The most relevant sources of information used in analyzing consequences and likelihood may include:

- Past records,
- Practical and relevant experience,
- Relevant published literature,
- Research findings,
- Results of public consultation, or
- Expert judgment.

4.2.3 Rate likelihood and impact

The probability and impact of occurrence for each identified risk will be assessed by the NBTS team using a 3 band rating scale.

A. Likelihood/Probability

- Critical- $\geq 90\%$ probability of occurrence
- High – From 60% to 89% probability of occurrence
- Medium – Between 10% and 59% probability of occurrence
- Low – Below 10% probability of occurrence

B. Impact

- Critical- Risk that has the potential to seriously impact Program cost, Program schedule or performance
- High – Risk that has the potential to greatly impact Program cost, Program schedule or performance
- Medium – Risk that has the potential to slightly impact Program cost, Program schedule or performance
- Low – Risk that has relatively little impact on cost, schedule or performance

Table 1: Risk Ratings in 3-Band Rating Scale

Number	Impact	Likelihood
4	Critical	Critical
3	High	High
2	Medium	Medium
1	Low	Low

4.2.4 Determine the overall risk rating

Once risks have been identified, it is necessary to assess the scale of the risk to allow the priority with which it should be managed to be agreed. NBTS uses a 4-point scale for both likelihood and impact. These scores are combined by simple multiplication to give a score from 1 for low risks to 16 for very high risks (Table 2). A risk at 1-2 is low, is also depicted by green colour; 3-7 is medium, also depicted by yellow colour and, 8-11 is high also depicted by amber colour and 12-16 is critical and is depicted by red colour (Table 3).

The initial assessment estimates the likelihood and impact without anything being done to prevent the risk from occurring. This gives the inherent risk rating, which allows subsequent review of the efficacy of controls.

Table 2: Risk assessment scoring:

Likelihood/Probability	4	4	8	12	16
	3	3	6	9	12
	2	2	4	6	8
	1	1	2	3	4
		1	2	3	4
	Impact				

Table 3: Risk rank levels, colour expression and responses

SCORE	COLOUR	LEVEL	MEANING AND RESPONSE REQUIRED
12-16		Critical	Very serious concern; highest priority. Take immediate action and review regularly.
8-11		High	High concern; highest priority. Take immediate action and review quarterly.
3-7		Medium	Moderate concern; steady improvement needed. Possibly review biannually
1-2		Low	Low concern; occasional monitoring. Tolerate; continue with existing measures and review annually.

4.2.5 Risk evaluation

Risk evaluation involves comparing a risk's overall exposure against the organization's risk tolerance. The purpose of risk evaluation is to make decisions, based on the outcomes of risk analysis, about which risks need treatment and to prioritize treatments. The output of a risk evaluation generally consists of a prioritized list of risks that require further action.

NBTS applies semi-quantitative analysis, where risks are ranked based on their numerical value. Effectiveness of available control is also rated. Then the likelihood of the risk occurring and potential consequences identified in the earlier phase are reassessed and the risks are plotted against the matrix. The numerical value assigned to the risk is a combination of the values assigned to likelihood and consequence after assessing the effectiveness of existing controls. The risk rank levels, colour expression and responses are managed as indicated in table 3 above. All risks that fall into red and yellow zones should have risk response planning which may include both a risk mitigation and a risk contingency plan.

4.2.6 Risk register

This is a document used for recording risk management process for identified risks. The following are important points to note regarding the risk register:

- i. The purpose of the risk register is to facilitate ownership and management of each risk.
- ii. Typically, the risk register covers significant risks facing the organization. It records the results of the risk assessment related to the process, operation, location, business unit or project under consideration.
- iii. All risk identification and analysis sheets are summarized in a single spread-sheet called the Risk Register
- iv. Most of the information needed to complete the register is already completed in the risk identification and analysis sheets.
- v. The risk identification and analysis sheets become attachments to the register to provide more information.

4.3 RISK RESPONSE PLANNING

Each major risk (within critical and high levels) will be assigned to a Program team member for monitoring purposes to ensure that the risk will not “fall

through the cracks”. For each major risk, one of the following approaches outlined below will be selected to address it and each of these responses must be proportional to the severity of the risk, cost effective, timely, realistic, accepted by all parties involved and owned by a person or party.

- **Avoid:** eliminate the threat by eliminating the cause. Risk avoidance is done by changing the project plan to eliminate the risk or the condition that causes the risk in order to protect the project objectives from its impact. Not all risks can be avoided, but some may.
- **Mitigate:** Risk mitigation aims at reducing the probability and/or impact of a risk to within an acceptable threshold. The probability/Impact should be mitigated before the risk takes place. Thus avoiding to deal with the consequences after the risk had occurred.
- **Accept:** Nothing will be done. Acceptance indicates a decision not to make any changes to the project plan to deal with a risk or that a suitable response strategy cannot be identified. This strategy can be used for both negative and positive risks. There are two types of acceptance:
 - Active acceptance: may include developing a contingency plan to execute should a risk occur.
 - Passive acceptance: requires no action. The project team will deal with the risk as it occurs.
- **Transfer:** Make another party responsible for the risk (buy insurance, outsourcing, etc.)

The following key steps will be followed when deciding risk treatment options:

- a) Identify risk treatment options,
- b) Conduct a cost-benefit analysis,
- c) Assign risk ownership,
- d) Prepare risk treatment plans,

For each risk that will be mitigated, the Program team will identify ways to prevent the risk from occurring or reduce its impact or probability of occurring. This may include prototyping, adding tasks to the Program schedule, adding resources, etc.

For each major risk that is to be mitigated or that is accepted, a course of action will be outlined for the event that the risk does materialize in order to minimize its impact.

NBTS will exploit, share or enhance positive risks (opportunities)

4.4 RISK MONITORING, CONTROLLING, AND REPORTING

4.4.1 Monitoring and controlling risks

Continuous monitoring and controlling of program risks ensures that the risk response strategy and the risk treatment action plan are implemented and progressed effectively. Risk reviews are included in the regular agenda of program management meetings and used in most of the program phases and milestones. Risk reviews will facilitate better change management and continuous improvement.

The process of controlling and monitoring risks includes the following tools and techniques:

- Risk reassessment
- Risk audits
- Technical performance measurement
- Reserve analysis (remaining risks after completion of the risk management activities; helps NBTS to accommodate these risks to minimize their impacts)
- Status meetings.

The main input to the risk controlling and monitoring process are the indicators

of the prioritized risks that have been identified for risk responding and treatment actions at NBTS headquarters and zonal level. The risk indicators will be used as criteria to review work performance data, including deliverables status, costs incurred, and program schedule progress.

The process of controlling and monitoring risks provides assurance that appropriate controls and procedures for managing risks are clearly understood and strictly followed. The process allows determining whether:

- The treatment actions adopted resulted in what was actually planned.
- All information on risk management procedures was appropriate.
- Improved knowledge has been reached and used to identify what lessons could be learnt for risk measurements and management for future activities.
- The risk controlling and monitoring process results in generating revisions to the risk register and supplementing with new action items for the risk treatment process.

4.4.2 Reporting and communicating risks

Communicating with NBTS network by means of program risk reports is a critical driving force to enhance undertaking adequate risk management and achieve NBTS goals. Risk communication and reporting helps the NBTS and its network to understand existing risks, opportunities and trade-offs. The purpose of risk communication and reporting is to ensure all parties are fully informed of existing risks avoiding unpleasant surprises and unauthorized actions. The Safety Officer will produce reports and communicate with stakeholders in order to maintain the consistency of risk management actions and underlying assumptions.

A risk report is a summary of program risks and opportunities, the latest status of treatment actions, and an indication of trends in the incidence of

risks. The following items serve as the basis for generating program risk status reports:

- The risk register and the supporting risk treatment action plan
- Work performance data reviews
- Program schedule progress
- Status of program deliverables produced

Risks reports will be submitted to NBTS HQ top management on semi-annual basis or as required. Table format will be preferred as it is best suited to operational risk reporting. This will be the summary of key components of the Risk Treatment Action Plans. These reports will be used by management to monitor and manage the update, implementation and review of risk management activities/plans.

5.0 References

1. Risk Management Plan Template-CDC.

<https://www.simpli.com/web?o=603695&l=sem&qo=serpSearchTopBox&q=cdc+risk+management+plan++template>. Accessed on 18th September 2018.

2. The United Republic of Tanzania, Ministry of Finance. Guidelines for Developing and implementing Institutional Risk Management Framework in the Public Sector. December, 2012.

6.0 APPENDICES

6.1 SOP ON RISK MANAGEMENT

DOCUMENT CONTROL

Revision Summary

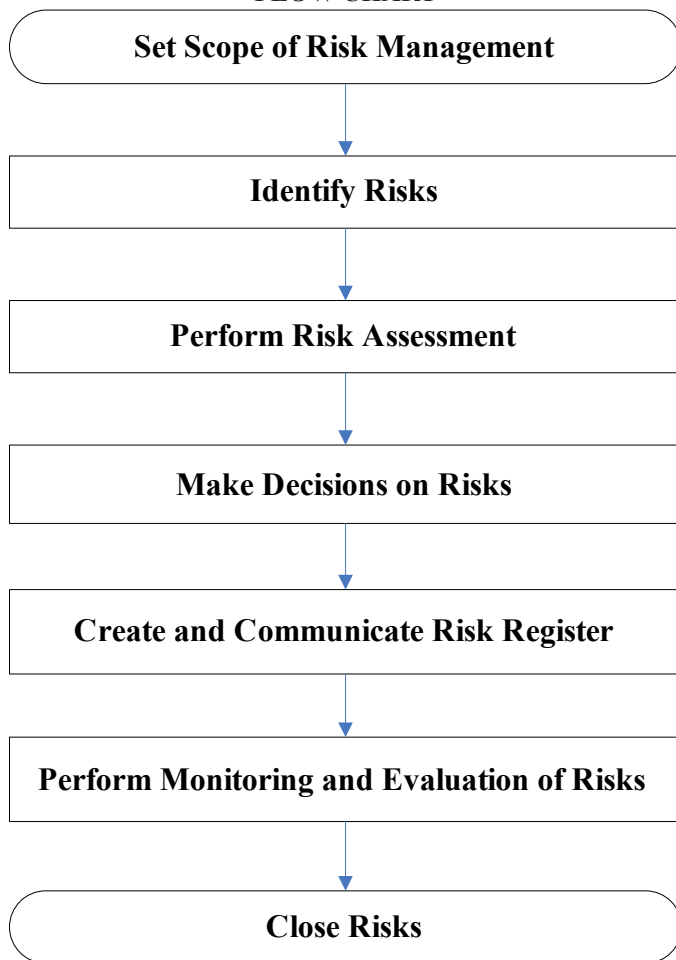
Procedure #	Version Number	Date	Reason for Revision	Revision details
SOP/QA/QS 065	1.0	October 2015	New	NA
SOP/QA/QS 065	2.0	July 2019	Technical and quality improvement	Change in numbering system
SOP/QA/QS 065	3.0	December 2019	Technical and quality improvement	Changes in score values and aligning the procedure with the framework.

Approvals

	DESIGNATION	NAME	SIGNATURE	Date	Effective Date
REVISED BY	Quality Officer	Oscar Mwashiuya			15/01/2020
VERIFIED BY	Head, Quality Assurance	Dunstan Haule			
APPROVED BY	Program Manager	Dr. Magdalena Lyimo			

STANDARD OPERATING PROCEDURE ON RISK MANAGEMENT

FLOW CHART



STANDARD OPERATING PROCEDURE ON RISK MANAGEMENT

STANDARD OPERATING PROCEDURE ON RISK MANAGEMENT																
1.Purpose	This document sets out procedures for identifying, assessing, managing, reporting and monitoring risks within National Blood Transfusion Service.															
2.Scope	This procedure is applicable to all activities covered by NBTS and its network.															
3. Definitions	<p>Risk: An event or set of circumstances, with an uncertain likelihood or outcome, which would have a negative impact on the organization should it be realized.</p> <p>Impact: What the consequences of a risk happening would be.</p> <p>Probability: An estimate of the likelihood of a risk happening once identified.</p> <p>Risk rating: The process by which the impact and probability of a risk are combined to give an overall risk rating.</p> <p>Risk assessment: A summary of the causes and consequences of a risk which include an initial risk rating, and potential courses of action.</p> <p>Risk register: Document recording identified risks.</p> <p>Controls: Those measures already in place to manage risk.</p> <p>Actions: Actions planned to manage risk.</p> <p>Reserve/residual risk: It is the risk remaining after risk treatment</p>															
4. Materials Required	<table><tr><td>Reagents</td><td>Supplies</td></tr><tr><td>N/A</td><td>N/A</td></tr></table>		Reagents	Supplies	N/A	N/A										
Reagents	Supplies															
N/A	N/A															
5. Responsible staff	All members of staff are responsible for implementing this procedure. Specific responsibilities are indicated in 6 below															
6. Procedure	<p>Follow the actions described below step-by-step:</p> <table><tr><td>Step</td><td>Action</td></tr><tr><td>6.1</td><td>Set objectives <i>Responsible staff: Safety Officer</i></td></tr><tr><td>6.1.1</td><td>Determine objectives pertaining to strategic, financial, human resource, information and communication technology, blood donor management, Laboratory and Information Communication and Technology (ICT).</td></tr><tr><td>6.2</td><td>Identify risks <i>Responsible staff: Safety Officer</i></td></tr><tr><td>6.2.1</td><td>Identify risks by assessing risks pertaining to NBTS sections and strategic objectives</td></tr><tr><td>6.1.2</td><td>Brainstorm on risks pertaining to each section and strategic objectives</td></tr><tr><td>6.2.3</td><td>Weigh the possibility (likelihood) and effect (impact) of each identified risk and omit those not meeting criteria of a risk.</td></tr></table>		Step	Action	6.1	Set objectives <i>Responsible staff: Safety Officer</i>	6.1.1	Determine objectives pertaining to strategic, financial, human resource, information and communication technology, blood donor management, Laboratory and Information Communication and Technology (ICT).	6.2	Identify risks <i>Responsible staff: Safety Officer</i>	6.2.1	Identify risks by assessing risks pertaining to NBTS sections and strategic objectives	6.1.2	Brainstorm on risks pertaining to each section and strategic objectives	6.2.3	Weigh the possibility (likelihood) and effect (impact) of each identified risk and omit those not meeting criteria of a risk.
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6.1.1	Determine objectives pertaining to strategic, financial, human resource, information and communication technology, blood donor management, Laboratory and Information Communication and Technology (ICT).															
6.2	Identify risks <i>Responsible staff: Safety Officer</i>															
6.2.1	Identify risks by assessing risks pertaining to NBTS sections and strategic objectives															
6.1.2	Brainstorm on risks pertaining to each section and strategic objectives															
6.2.3	Weigh the possibility (likelihood) and effect (impact) of each identified risk and omit those not meeting criteria of a risk.															

6.2.4	Document each risk in a separate Risk Identification and Analysis Sheet
6.3	Perform risk assessment <i>Responsible staff: Safety Officer</i>
6.3.1	Assign scores for likelihood and impact using a four-point scale for both likelihood and impact (1 for low likelihood and impact and 4 for high likelihood and impact)
6.3.2	Combine the scores assigned in 6.3.1 by simple multiplication to give inherent risk a score from 1 for low risks to 16 for critical risks
6.3.3	Assign risk rating as Critical (12-16), high (8-11), medium (3-7) and low (1-2)
6.3.4	Evaluate risk by assessing effectiveness of available controls then determine likelihood and impact given the available controls
6.3.5	Provide risk rank using likelihood and impact values assigned in 6.3.4 above
6.4	Make decisions on risks <i>Responsible staff: Safety Officer</i>
6.4.1	Make decisions after thoroughly assessing the risk and reviewing the efficacy of available controls. The decisions may fall into four categories: <ul style="list-style-type: none"> •Avoid: eliminate the threat by eliminating the cause Risk avoidance is done by changing the project plan to eliminate the risk or the condition that causes the risk in order to protect the project objectives from its impact •Mitigate: Risk mitigation aims at reducing the probability and/or impact of a risk to within an acceptable threshold. The probability/Impact should be mitigated before the risk takes place. Thus avoiding to deal with the consequences after the risk had occurred. •Accept: Nothing will be done. Acceptance indicates a decision not to make any changes to the project plan to deal with a risk or that a suitable response strategy cannot be identified. •Share
6.5	Create and communicate risk register <i>Responsible staff: Safety Officer</i>
6.5.1	Use risk list to create a risk register.
6.5.2	Categorize risks into strategic, financial, human resource, information and communication technology, blood donor management, Laboratory and Information Communication and Technology (ICT)
6.5.3	Suggest action to be taken
6.5.4	Assign risks to responsible person(s)
6.5.5	Circulate the risk register to staff in the organization through meetings or other feasible means
6.6	Perform Monitoring, evaluation, review and reporting of risks <i>Responsible staff: Safety Officer</i>

	<p>6.6.1 Record information on frequency of occurrence and impact of each risk whenever it occurs on daily basis in occurrence log</p> <p>6.6.2 Report risk indicators on monthly basis using reporting tool</p> <p>6.6.3 Perform biannual evaluations by using the following means:</p> <ul style="list-style-type: none"> •Reassessments •Risk audits •Reserve analysis <p>6.6.4 Review the risk register biannually or as required</p> <p>6.6.5 Report progress against existing risks (including current risk ratings) and identify where changes to planned actions or current controls are required during management review meeting.</p> <p>6.7 Close risks <i>Responsible staff: Safety Officer</i></p> <p>6.7.1 Remove a risk from risk register where there is no possibility of it occurring; or by the risk actually happening</p> <p>6.7.2 Document reason for closure</p> <p>6.7.3 Update the risk register</p>
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7. Reference	<p>1. Risk Management Standard Operating Procedure (SOP). https://www.btp.police.uk/pdf/Risk-Management-SOP-22.06.10.pdf. Visited on 28/08/2018</p> <p>2. Risk Management Plan Template-CDC. https://www.simpli.com/web?o=603695&l=sem&qo=serpSearchTopBox&q=cdc+risk+management+plan++template. Accessed on 18th September 2018.</p>
8. Required Records	Risk register, quarterly risk management reports, biannual evaluation records
9. Appendages	NA
10. Equipment	NA
11. Sample	NA
12. Special Safety Precautions	Refer to NBTS safety manual
13. Quality Control	NA
14. Calculations	NA
15. Maintenance	Refer to Planned Preventive Maintenance Manual for specific requirements

6.2 RISK IDENTIFICATION AND ANALYSIS SHEET

Risk title: Provide a brief title of the risk		Risk ID: provide a unique identity			
Overview					
Risk	<i>Provide a brief description of the risk</i>				
Risk owner	<i>Include title of the person managing the risk and the area where the risk falls</i>				
Risk Category	<i>Is it a strategic, donation, laboratory etc.</i>				
Details					
Causes: <i>Provide the causes that may lead to the risk materializing</i>			Consequence(s): <i>Provide description of what will happen if the risk will materialize</i>		
Inherent risk analysis (tick the appropriate ratings basing on the scenario that current controls do not exist or completely fails)					
Inherent risk	Impact:	CRITICAL	HIGH	MODERATE	LOW
	Likelihood:	CRITICAL	HIGH	MODERATE	LOW
Risk rating	Impact x likelihood: <input type="text"/>	<i>Multiply the ratings from impact and likelihood.</i>			
		<i>Shade this area with appropriate colour</i>			
Key risk mitigation/controls <u>currently in place and their weaknesses:</u> <i>briefly describe the current controls existing to reduce the inherent risk, also point out the main weaknesses for the current controls</i>					
Residual risk analysis (tick the appropriate ratings basing remaining risk levels after the above existing controls)					
Residual risk	Impact:	CRITICAL	HIGH	MODERATE	LOW
	Likelihood:	CRITICAL	HIGH	MODERATE	LOW
Risk rating	I X L: <input type="text"/>	<i>Multiply the ratings from impact and likelihood.</i>			
		<i>Shade this area with appropriate colour</i>			
Actions/mitigating controls to be taken: propose feasible treatment actions to be put in place to reduce the risk at tolerable levels, including resources required for each treatment action –financial, physical assets, or human)					
Treatment:		Resource(s) required			
1.		1.			
2.		2.			
3.		3.			




6.3 RISK REGISTER

OBJECTIVE/ TARGET (write the objective affected by the risk)	RISK TITLE (as it appears in the identification sheet)	CATEGORY OF RISK (as described in the identification sheet)	RISK ID (as in the identification sheet)	RESIDUAL RISK ASSESSMENT (as in the identification sheet)		RISK RATING (I X L) [Product multiplying Impact by Likelihood]	RISK STATUS (write either HIGH, MEDIUM or LOW and shade it with the appropriate colour)	PRINCIPAL RISK OWNER (as in the identification sheet)
				IMPACT (I)	LIKELIHOOD (L)			
Objective A	Risk A.01							
	Risk A.02							
	Risk A.02							
	Etc.							
	Etc.							
Objective B	Risk B.01							
	Risk B.02							
	Etc.							
	Etc.							

[illegible]

RISK MANAGEMENT FRAMEWORK APPROVAL

The undersigned acknowledge they have reviewed the Risk Management Plan for the National Blood Transfusion Service. Changes to this Risk Management Plan will be coordinated with and approved by the undersigned or their designated representatives.

	DESIGNATION	NAME	SIGNATURE	Date	Effective Date
WRITTEN BY	Quality Officer	Oscar Mwashuuya		13/01/2020	15/01/2020
	Operations Officer	Dr. Abdu Juma		13/01/2020	
AUTHORIZED BY	Program Manager	Dr. Magdalena Lyimo		13/01/2020	

