	AGENDA ITEM
	6.1

CTM BOARD

ORGANISATIONAL RISK REGISTER

Date of meeting	25/03/2021

FOI Status	Open

If closed please indicate reason	Not Applicable Public Meeting

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Presented by	Georgina Galletly, Director of Corporate Governance
Approving Executive Sponsor	Director of Corporate Governance

Report purpose	FOR REVIEW & APPROVAL

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Service, Function and Executive Review	February / March 2021	RISKS AMENDED
Management Board	March 2021	REVIEWED AND ENDORSED

ACRONYMS	
ICT	Information Communications Technology
ILG's	Integrated Locality Groups
IMTP	Integrated Medium Term Plan

1. SITUATION/BACKGROUND

1.1 The purpose of this report is for the Health Board to review and discuss the organisational risk register and consider whether the risks escalated to the Organisational Risk Register have captured all relevant risks, and they have been appropriately assessed and mitigated.

1.2 The report should be considered in the context that risks within the organisation are still undergoing a robust review and therefore the organisational risk register remains a work in progress and activity continues in order to ensure a consistency of approach to the quantification of risk across the Health Board.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 **Gold Command – Covid-19 Risks –** The Gold Command risk log was being held separately to the Organisational Risk Register due to the evolving position. As Gold Command has recently been stood down, the Covid-19 risk log is being reviewed with relevant legacy risks being transferred to the Organisational Risk Register as appropriate. A further update on this will be provided to the May 2021 Board meeting.

2.3 Further progress has been made in developing the organisational risk register and underpinning the risk management process since the last report received by the Board in January 2021. Improvements include;

- The CTMUHB Risk Management Strategy, Risk Management Policy and Risk Assessment Procedure were approved in January 2021.
- The internal website in relation to risk management has been updated to support the revised documents and includes the supporting information to assist staff in undertaking risk management activity and risk assessments.
- The Organisational Risk Register format has been revised;
  - o Risks mapped to the Strategic Objectives and revised Risk Domains.
  - o Consequence and likelihood assessment now included to support cross-referencing with the heat map.
  - o 'Last Reviewed' and 'Next Review' dates added.
- During February 2021, Risk Managers have undertaken a robust review of all risks to ensure mitigation and action plans are fit for purpose, particularly where there has been little or no improvement in reducing the risk for some time. It is important to note that where risks have been updated, they are indicated in red in Appendix 1. This action will continue as part of the regular review of the risk register for ease of reference.
- A review of Medical Education risks have been considered in conjunction with the routine issues log received by Health Education and Improvement Wales and no risks required escalation to the Organisational Risk Register at this stage.

- The ILG work to both rationalise and standardise the Clinical Service Group (CSG) risk registers has been impacted by the operational pressures caused by the COVID-19 pandemic. The ILG Heads of Quality and Safety will resume this work with CSGs.
- The Risk Management Improvement Plan has progressed, with updates outlined in Appendix 2.
- A Board Development Session will be held later in the year to further develop the grading of principal risks and review the Health Board's risk appetite tolerance levels. It is considered that the Organisational Risk Register, in its revised format, requires time to mature and embed before the Health Board shifts to reporting in a strategic risk approach in the form of a Board Assurance Report, hence delaying the session originally planned for April 2021. This is reflected in the Risk Management Improvement Plan at Appendix 2.

2.4   The Internal Audit review on Risk Management was finalised and reported on at the February 2021 Audit & Risk Committee, noting 'Reasonable Assurance'.

3   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1   NEW RISKS

1. Datix ID 4565 – Security at the Information Hub in Williamstown. Risk assessed at a risk rating of 20.

A new risk is currently being considered in relation to the implementation of the Once for Wales Datix programme and will be included in a future update as appropriate.

3.2   CHANGES TO RISK RATING

a) Risks where the risk rating INCREASED during the period
Nil in this period.

b) Risks where the risk rating DECREASED during the period

1. Datix ID 4285 – Replacement of the Auto Remat System for processing of clothing and coats due to age. Risk rating decreased from 16 to 12 and therefore de-escalated from the Organisational Risk Register and will now be monitored locally by the Facilities Function.

2. Datix ID 2796 – Unsupported Server Operating Systems. Risk rating decreased from 16 to 9 and therefore de-escalated from the Organisational Risk Register and will now be monitored locally by the ICT Function.

3. Datix ID 3368 – Windows 7 OS Devices not being replaced by end of life. Risk rating decreased from 16 to 9 and therefore de-escalated from the Organisational Risk Register and will now be monitored locally

by the ICT Function.

4. Datix ID 2725 – Server System Resilience and Disaster recovery. Risk rating decreased from 15 to 9 and therefore de-escalated from the Organisational Risk Register and will now be monitored locally by the ICT Function.

5. Datix ID 3856 – Current DAKS/OSCAR Crash System coverage within Royal Glamorgan Hospital. Risk rating decreased from 15 to 9 and therefore de-escalated from the Organisational Risk Register and will now be monitored locally by the ICT Function.

6. Datix ID 3858 – DAKS/OSCAR System requires Upgrade (EOL). Risk rating decreased from 15 to 9 and therefore de-escalated from the Organisational Risk Register and will now be monitored locally by the ICT Function.

7. Datix ID 4418 – Digital Stategy Plan. Risk rating decreased from 15 to 8 and therefore de-escalated from the Organisational Risk Register and will now be monitored locally by the ICT Function.

8. Datix ID 4248 – Care of Patients with mental health need on Community Hospital sites. Risk rating decreased from a 15 to a 9 and 8 and therefore de-escalated from the Organisational Risk Register and will now be monitored locally by the Clinical Service Group within the Rhondda Taf Ely Locality.

9. Datix ID 4332 – Anticipated Impact of the Opening of the Grange University Hospital. This risk has been de-escalated from a 20 to a 12 and will now be monitored locally by the Clinical Service Group within the Merthyr & Cynon Locality.

The rationale for de-escalation for each of these risks is captured in Appendix 1.
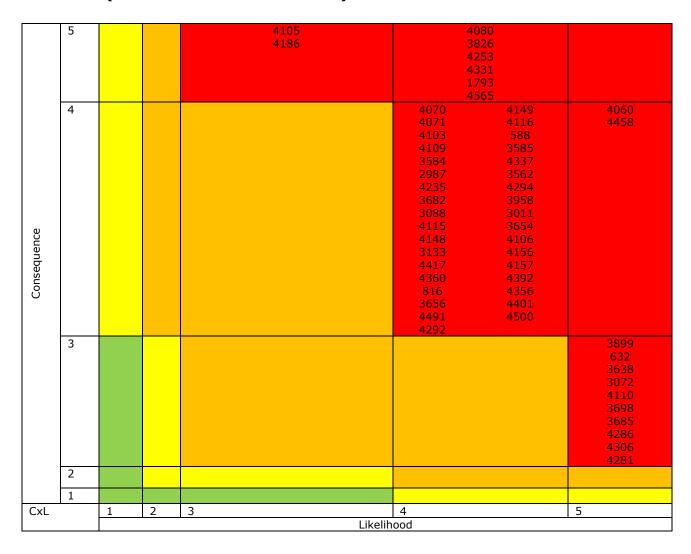
3.3 CLOSED RISKS

1. Datix ID 4150 – Wearing FFP3 Masks for 2 Hours in a high risk area. This risk has been closed as the target rating has been met and the control measures implemented have mitigated this risk.

2. Datix ID 3183 – Prince Charles Hospital Pharmacy Environment and Structure including a Fire Enforcement Notice. This risk has been closed as the target rating has been met and the action taken has mitigated this risk.

3. Datix ID 588 – Revenue stream does not keep pace with increasing demands on the ICT service for both equipment and the staff to deliver a service. This risk has been reviewed and is considered to be an 'issue' rather than a risk and will therefore be added to the ICT Issue Log instead of the Risk Register.

4. Datix ID 4113 – Risk of interruption to service sustainability, provision and destabilising the financial position regarding Brexit. This risk has been closed as the target rating has been met and the control measures implemented have mitigated this risk.

The rationale for closure has been captured in Appendix 1.

3.4 Organisational Risk Register - Visual Heat Map by Datix Risk ID (Risks rated 15 and above):

Consequence \ Likelihood	1	2	3	4	5
5			4105 4186	4080 3826 4253 4331 1793 4565	
4				4070 4149 / 4071 4116 / 4103 588 / 4109 3585 / 3584 4337 / 2987 3562 / 4235 4294 / 3682 3958 / 3088 3011 / 4115 3654 / 4148 4106 / 3133 4156 / 4417 4157 / 4360 4392 / 816 4356 / 3656 4401 / 4491 4500 / 4292	4060 4458
3					3899 632 3638 3072 4110 3698 3685 4286 4306 4281
2					
1					

CxL — Likelihood (1, 2, 3, 4, 5)

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	Aim to mitigate risks to patients and staff
Related Health and Care standard(s)	Governance, Leadership and Accountability
	All Health and Care Standards are included
Equality impact assessment completed	No (Include further detail below)

Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care

5. RECOMMENDATION

5.1   The Health Board is asked to:
- **REVIEW** the detailed Organisational Risk Register at Appendix 1.
- **APPROVE** the recommendations in relation to accepting the new risks, de-escalated risks, updated risks and closed risks.
- **NOTE** the progress made against the risk improvement journey milestones at Appendix 2.