



AGENDA ITEM

5.6

CTM BOARD

ORGANISATIONAL RISK REGISTER

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| Date of meeting | 25.11.2021 |
| FOI Status | Open |
| If closed please indicate reason | Not applicable - Public Meeting |
| Prepared by | Cally Hamblyn, Assistant Director of Governance & Risk |
| Presented by | Cally Hamblyn, Assistant Director of Governance & Risk |
| 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 Formal Review | August / September 2021 | RISKS REVIEWED |
| Management Board | 25.08.2021 | RISKS REVIEWED AND MANAGEMENT BOARD SIGN OFF RECEIVED |
| Health Safety & Fire Sub Committee | 13.09.2021 | ASSIGNED RISKS REVIEWED |
| Management Board | 22.09.2021 | RISKS REVIEWED AND MANAGEMENT BOARD SIGN OFF RECEIVED |
| Audit & Risk Committee | 4.10.2021 | RISKS REVIEWED |
| Population Health & Partnership Committee | 6.10.2021 | ASSIGNED RISKS REVIEWED |



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| People & Culture Committee | 13.10.2021 | ASSIGNED RISKS REVIEWED |
| Digital & Data Committee | 14.10.2021 | ASSIGNED RISKS REVIEWED |
| Planning, Performance & Finance Committee | 18.10.2021 | ASSIGNED RISKS REVIEWED |
| Quality & Safety Committee | 22.11.2021 | ASSIGNED RISKS REVIEWED |

ACRONYMS

| | |
|-------|----------------------------|
| CSGs | Clinical Service Groups |
| ILG's | Integrated Locality Groups |

1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is for the Management Board to review and discuss the organisational risk register and consider whether the risks escalated to the Organisational Risk Register have been appropriately assessed and endorse onward reporting to Board/Board Committees.
- 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 to ensure a consistency of approach to the quantification of risk across the Health Board.

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

- 2.2 The following progress has been made since the last report:
- The ILGs are continuing to work to both rationalise and standardise the Clinical Service Group risk registers, the pace of this activity has been impacted by the operational pressures in response to Covid-19, however, activity has resumed and outlined below is the position of each ILG below in relation to the target of October 2021 for all risks held on the Datix system to have been reviewed.

Bridgend ILG – The Nurse Director provided a presentation to the Audit and Risk Committee in October 2021 on the progress to date on the review of risks within the ILG. It is anticipated that Bridgend ILG will have a fully reviewed risk register by the end of October.

Rhondda Taf Ely ILG - All Clinical Service Groups (CSGs) report having reviewed their entire risk registers. However, there is still room for improvement to ensure the standard fully aligns with the Risk Management Strategy. Meetings are taking place, being led by

the ILG Operations Director, over the next week to provide targeted support to CSGs where required and ensure consistency of approach and calibration across the ILG. It is anticipated that RTE will have a fully reviewed risk register by mid-October at the latest.

Merthyr & Cynon ILG – All Clinical Service Groups (CSGs) continue to review their entire risk registers. A focussed risk session is scheduled for the 6th October led by the ILG Head of Quality & Safety with the support of the Assistant Director of Governance and Risk. This session and further targeted support will assist CSGs where required and ensure consistency of approach and calibration across the ILG. It is anticipated that M&C will have a fully reviewed risk register by the end of October 2021.

- The Locality Groups presented an update on the status of their review of risks at the Board Development Session on the 21st October 2021.
- Monthly Risk Management Awareness Sessions (Virtually via Teams) implemented in January 2021 continue to have increasing engagement. The monthly sessions are set in the calendar until the end of 2022. 257 members of staff trained from January to October 2021.
- Risks on the organisational risk register have been updated as indicated in red.
- Updated Targeted Intervention programme in relation to risk updates – see Appendix 2.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 NEW RISKS

Escalated to the August Management Board

Primary Care

- Datix ID 4747 – Overnight District Nursing Service Merthyr and Cynon, Rhondda and Taff Ely. Risk rated as a 16.

Facilities

- Datix ID 4768 – Replacement of press tank on the 13 stage CBW Press. Risk rated as a 15.
- Datix ID 4772 – Replacement of press software on the 13 & 10 stage CBW presses.

Mental Health

- Datix ID 4691 – New Mental Health Unit. Risk rated as a 15

Occupational Health

- Datix ID 4677 – Absence of Varicella (Chicken Pox) Vaccination Programme for Staff. Risk rated as a 16.
- Datix ID 4676 – Absence of Perussis (Whooping Cough) Vaccination Programme for Staff. Risk rated as a 16.
- Datix ID 4679 – Absence of a TB Vaccination Programme for Staff. Risk rated as a 16.

Infection Prevention Control / Decontamination

- Datix ID 4776 - Manual decontamination of Transoesophageal Echocardiogram (TOE) probes. Risk rated as a 16.

Merthyr Cynon Locality Group

- Datix ID 4784 – Consultant presence on the neonatal unit. Risk rated as a 16.

Rhondda Taf Ely Locality Group

- Datix ID 4721 – Shift of the boundary for attendances at the ED. Risk rated as a 20.
- Datix ID 4722 – Senior Medical Workforce Shortfall. Risk rated as a 20.

Medicines Management & Pharmacy

- Datix ID 4753 – Maternity: Lack of Pharmacy clinical service, medicines governance and medicines safety. Risk rated as a 16.

Escalated to the September Management Board

Rhondda Taf Ely Locality

- Datix ID 4785 – Becton Dickinson Blood Collection Tubes Shortage. Risk rated as a 16. This risk represents the position across the Health Board.

Merthyr & Cynon Locality – Therapies Service

- Datix ID 4800 – The Co-ordination of automatic repatriation of patients from Major Trauma Centre(s) to any site in CTMUHB. Risk rated as a 15.
- Datix ID 4652 – Therapies provision to increased numbers of stroke patients in PCH, POW and YCR and community/out patients. Risk rated as a 15.

3.2 CHANGES TO RISKS

Considered at the August 2021 Management Board

a) REFRAMING of risks during the period

- Datix ID 4632 – Demand and capacity across the stroke pathway was reframed this period to a risk affecting all localities. Initially raised by RTE Locality.

b) Risks where the risk rating INCREASED during the period

Nil.

c) Risks where the risk rating DECREASED during the period

Considered at the August 2021 Management Board

Infection Control / Decontamination Function

- Datix ID 2018 – Poor compliance with Infection Prevention Control

training. Risk reduced from a risk rating of 16 to a 12.

- Datix ID 1793 - Provision of negative pressure rooms in CTMUHB in line with WHC (2018) 033.

Rhondda Taf Ely Locality

- Datix ID 4567 - Lack of endocrine surgical service in RTE. Risk reduced
Risk reduced from a risk rating of 16 to a 12.

Rationale for de-escalation is captured in Appendix 1.

Considered at the September 2021 Management Board

Rhondda Taf Ely Locality Group

- Datix ID 4620 – Access to Neath Port Talbot Hospital to deliver breast surgery. Risk reduced from a 15 to a 12 this period and will now be monitored via the ILG Risk Register.
- Datix ID 4281 – Delivery of the rehabilitation for repatriated major trauma patients. To avoid duplication this risk has been de-escalated from the Organisational Risk Register as there is a Health Board wide entry that captures this risk. Please see Datix reference ID 4800 and section 3.1 above which references this new risk which was escalated in September 2021.

3.3 CLOSED RISKS FROM THE ORGANISATIONAL RISK REGISTER

Considered at the August 2021 Management Board

Infection Control / Decontamination Function

- Datix ID 4482 – Decontamination of dental equipment in the community.

Rhondda Taf Ely Locality

- Datix ID 4292 – Long waiting times and large backlog for cardiac echo.

Merthyr Cynon Locality

- Datix ID 3011 - Non compliance with appropriate fetal growth detection and management guidance.
- Datix ID 3682 - Risk to Obstetric Theatres National Standards.
- Datix ID 3685 - No Midwifery Specialist for pregnant women with vulnerabilities.
- Datix ID 3958 - Elective patients surgery cancelled when high level bed pressures are experienced.

Rationale for closure is captured in Appendix 1.

Considered at the September 2021 Management Board

Nil this period.



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

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|-------------|---|---|---|------------------------------|---|--|--|
| Consequence | 5 | | | 4253 3337 4768 4772 | 4080 3826 4664 4789 | | |
| | 4 | | | | 4149 3742 4106 4157 4156 4458 4148 4337 2987 4294 3008 4356 4500 816 4706 4282 4741 4743 4747 4677 4784 | 4152 4478 4217 4476 4116 3585 4684 4686 4685 3654 3133 4360 3656 4699 1133 4752 4676 4679 4776 4785 | 4491 4060 4629 4477 4632 3562 4071 4688 4203 4721 4722 4103 |
| | 3 | | | | | 3899 4606 3638 4218 3072 4672 4110 4671 3698 4512 3161 4693 4691 4590 4800 4691 4652 | |
| | 2 | | | | | | |
| | 1 | | | | | | |
| CxL | 1 | 2 | 3 | 4 | 5 | Likelihood | |

4. IMPACT ASSESSMENT

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|---|---|
| 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. |



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| 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 are asked to:

- **REVIEW** the detailed Organisational Risk Register at Appendix 1.
- **APPROVE** the recommendations in relation to New Risks, Updated Risks and Closed risks in section 3.1.
- **NOTE** – the progress made against the risk journey milestones at Appendix 2.