

AGENDA ITEM
6.2.1

CTM BOARD

ORGANISATIONAL RISK REGISTER

Date of meeting	31st March 2022

FOI Status	Open
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If closed please indicate	Not applicable – Public Meeting
reason	Not applicable - Fublic Meeting

Prepared by	Cally Hamblyn, Assistant Director of Governance & Risk			
Presented by	Georgina Galletly, Director of Corporate Governance			
Approving Executive Sponsor	Director of Corporate Governance			

Report purpose	FOR REVIEW & APPROVAL
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Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Service, Function and Executive Formal Review	February/March 2022	RISKS REVIEWED
Strategic Leadership Group	16 th March 2022	MANAGEMENT SIGN OFF RECEIVED
Quality & Safety Committee	22 nd March 2022	REVIEW OF ASSIGNED RISKS
Digital & Data Committee	23 rd March 2022	REVIEW OF ASSIGNED RISKS

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1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is for the 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 highlight the management actions being taken to manage or mitigate these high level risks.
- 1.2 The report should be considered in the context that risks within the organisation will continue to be reviewed 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:
 - Monthly Risk Management Awareness Sessions (Virtually via Teams) were implemented from January 2021 with increasing engagement and attendance growing month on month. The monthly sessions are set in the calendar until the end of 2022 and will continue beyond that date if required. 307 members of staff trained from January 2021 to date.
 - Targeted training session undertaken with District/Community Nursing Team and the Patient, Care and Safety Function.
 - Risks on the organisational risk register have been updated as indicated in red.
 - The entries on the Organisational Risk Register have been aligned to the new Strategic Goals.
 - The revised Board Assurance Framework, Risk Appetite Statement and Risk Domain Matrix was received at the Board Development Session on the 23rd February 2022 and will now progress through to Board for approval on the 31st March 2022.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 **NEW RISKS**

Information Governance

 Datix ID 4339 – Failure to complete a timely Data Protection Impact Assessment (DPIA). Risk rated as a 16. Highlighted as a new risk to the Organisational Risk Register as risk rating increased from a 12 to a 16.

Patient Care & Safety

• Datix ID 5031 – Clinical Education & Training Accommodation. Risk rated as a 15.



Therapy Services

 Datix ID 4920 - Capacity within the ED/ Medical/ Rehabilitation and Orthopaedic Inpatient Occupational Therapy Service within Princess of Wales. Risk rated as a 15.

Merthyr Cynon Locality Group

• Datix ID 5017 – Implementation of the Additional Learning Needs (ALN) Act. Risk rated as a 16.

Digital & Data Risks

Datix ID 5040 – DHCW Interdependencies. Risk rated as a 15.

3.2 CHANGES TO RISKs

a) Risks where the risk rating **INCREASED** during the period

Information Governance

 Datix ID 4699 - Failure to deliver a robust and sustainable Information Governance Function. Risk rating increased from a 16 to a 20.

b) Risks where the risk rating **DECREASED** during the period

Communications & Engagement

• Datix ID 4116 - Organisational Reputation - Lack of confidence in the services and care provided by the organisation. Risk rating decreased from a 16 to a 12.

Bridgend Locality Group

 Datix ID 4149 – Failure to sustain Child and Adolescent Mental Health Services. Risk rating decreased from a 20 to a 16.

Merthyr & Cynon Locality Group

 Datix ID 4684 – Emergency Department Environment at Prince Charles Hospital. Risk rating decreased from a 16 to a 12.

Infection, Prevention and Control

- Datix ID 4479 No Centralised decontamination facility in Princess of Wales Hospital (POWH). Risk rating decreased from a 20 to a 16.
- Datix ID 4478 Inappropriate decontamination process in place for laryngoscope handles in RTE & MC. Risk rating decreased from a 16 to an 8. This risk will now be removed from the Organisational Risk Register and managed locally by the function.
- Datix ID 4476 Manual decontamination of nasoendoscopes in RTE & MC. Risk rating decreased from a 16 to an 8. This risk will now be removed from the Organisational Risk Register and managed locally by the function.



Patient, Care & Safety

- Datix ID 4940 Delay to full automated Implementation of Civica. Risk rating decreased from a 20 to a 16.
- Datix ID 4789 Number of overdue Serious Incidents awaiting completion. Risk rating decreased from a 15 to a 10.

3.3 CLOSED RISKS FROM THE ORGANISATIONAL RISK REGISTER

Pharmacy & Medicines Management

- Datix ID 3072 Temperatures in medicines storage room on the wards in Prince Charles Hospital not fit for purpose. Risk Closed as target score met.
- Datix ID 3161 Lack of Wholesaler Dealers Authorisation. Risk Closed as target score met.

Facilities / Digital Risk

- Datix ID 4693 Electrocardiogram (ECG) carts not connecting to hospital network. Risk closed as target score met.
- Datix ID 4768 Replacement of press tank on the 13 stage CBW Press. Risk Closed as target score met.

Patient Care & Safety

• Datix ID 3899 - Clinical staff resuscitation training compliance. Risk closed as superseded by new risk Datix ID 5031.

The rationale for closure is captured in Appendix 1.

3.4 **POINTS TO NOTE:**

- Locality Group Return RTE and Bridgend:
 - The Rhondda Taf Ely (RTE) ILG Director Triumvirate returned the March update on risks to their Clinical Service Group leads to provide a more robust update on risk mitigation and therefore no updates were received for the Organisational Risk Register on RTE risks on this occasion whilst this is undertaken. The return will therefore be captured in the next iteration of the Organisational Risk Register in May 2022.
 - Due to staff absence a risk update return was not received from Bridgend ILG on this occasion although risks 4149 and 4253 have been updated following a formal request by the Board at the January 2022 meeting.

It should be noted that this risk submission coincided with extreme operational flow pressures and the Welsh Government 'reset' period meaning CSG Managers were unable to dedicate additional time to make the necessary improvements.



- The Executive Medical Director is exploring the escalation of a risk relating to Clinical Policies.
- Rhondda Taf Ely Locality are developing a cancer site specific risk around breast.
- Merthyr Cynon Locality are due to escalate risk ID 4728 Neurology Service PCH which currently has a risk rating of 20, currently in discussion with counterparts in RTE Locality to consider if this has wider Health Board implications.
- A risk in relation to Pathology (Capacity vs Demand) is currently being reviewed by RTE Locality. Although RTT and demand on services is captured in many of the risks already highlighted to the Organisational Risk Register.

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

	5			4253 3337 4768	38	980 326	
	4	4772			4152 3585 3654 3133 2787 1133 4752 4679 4356	4491 4629 4632 4071 4688 4203 4721 4722 4103	
Consequence					3008 4500 816 4706 4282 4743 4798 4906 4908	4873 4922 4907 3267 4339 4479 4940 5017	4841 4217 4652 4866 4699
	3						5031 4672 3638 4671 3698 4512 4691 4590 4888 4691 4732 4923 4833 2808 4920 5040
	2						
CxL	1	1	2	3	4 Likelihood		5



4. IMPACT ASSESSMENT

Quality/Safety/Patient	Yes (Please see detail below)	
Experience implications	Aim to mitigate risks to patients and staff	
Related Health and Care	Governance, Leadership and Accountability	
standard(s)	All Health and Care Standards are included	
Equality impact assessment	No (Include further detail below)	
completed		
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.	
Resource (Capital/Revenue	There is no direct impact on resources as a	
£/Workforce) implications /	result of the activity outlined in this report.	
Impact		
Link to Strategic Well-being	Provide high quality, evidence based, and	
Objectives	accessible care.	

5. RECOMMENDATION

- 5.1 The Board is asked to:
 - Review the detailed Organisational Risk Register at Appendix 1.
 - **Approve** the recommendations outlined in section 3.1-3.3
 - **Note** the updates in section 3.4.