



AGENDA ITEM

6.4

CTM BOARD

ORGANISATIONAL RISK REGISTER

Date of meeting	26/11/2020
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FOI Status	Public
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If closed please indicate reason	Not applicable Public Meeting
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Prepared by	Cally Hamblyn, Assistant Director of Governance & Risk
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Presented by	Cally Hamblyn, Assistant Director of Governance & Risk
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Approving Executive Sponsor	Director of Corporate Governance
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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 Review	October 2020/November 2020	RISKS AMENDED
Management Board	18/11/2020	REVIEWED AND ENDORSED

ACRONYMS	
ILG's	Integrated Locality Groups
IMTP	Integrated Medium Term Plan



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 the Health Board and Board Committees as appropriate.
- 1.2 The report should be considered in the context that risk management within the organisation is still undergoing a robust review – see Appendix 2 for detail on the Risk Management Improvement Plan.

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

- 2.1 Further **progress** has been made since the last report received in October 2020 to include;
- The inclusion of the high level risks to the Organisational Risk Register escalated from Rhondda Taf Ely Locality Group.
 - The inclusion of Facilities risks. These are not new risks but risks graded 15 and above that had not been escalated to the Organisational Risk Register previously, are now aligned to the Risk Management Strategy. For ease of reference the facilities risks added this month have been included in the “new risk” section at 3.1.
 - All Executive Directors now have full access to Risks on the Datix system.
 - An action plan for restructuring the Datix Risk Module to improve alignment with the Risk Management Strategy has been agreed.

Further work will be undertaken in conjunction with corporate functions and the Integrated Locality Groups to further peer review and calibrate risks as appropriate to ensure a consistency of approach to the quantification of risk across the Health Board.

- 2.2 During the period **Internal Audit Services have initiated a review of Risk Management** in the Health Board. The areas that the review will seek to provide assurance on are that:
- A plan is in place for reviewing the risk management system both in the short term and longer term, with key milestones and timeframes set, and appropriate monitoring and updates as necessary.
 - A risk management strategy, and associated assurance framework, is in place that has been appropriately approved, communicated to staff, and aligns to other key documents

including the terms of reference of relevant responsible committees.

- Training in relation to the new risk management approach is underway at all levels within the Health Board, including those recording risk on Datix, and Independent Members responsible for monitoring risk.
- A consistent risk scoring approach is applied at each level within the Health Board. Where the recorded mitigating actions reduce an inherent risk score to a much lower residual score, those actions are robust. Where risk scores increase or decrease, especially at organisational or strategic levels, decisions can be evidenced.
- An effective process is in place for the escalation and de-escalation of risks through the Health Board.
- Consideration has been given to the development of a board assurance framework with a plan in place for how this will be populated with the Health Board's strategic risks.
- Effective monitoring and reporting of risks takes place at the various tiers within the Health Board, including at committee level.

The fieldwork commenced in October and will continue into November with a debrief meeting towards the end of November 2020. Limiting the impact on the ILG's engagement in the audit has been acknowledged by the Audit Team and will be managed as appropriate to avoid further pressures whilst the teams respond to the Covid-19 pandemic.

- 2.3 **Gold Command – Covid-19 Risks** - As Gold Command was re-established in September 2020 in response to a rise in infection rates in the CTM communities, a COVID-19 Gold Command Risk Log has been developed. This risk log is being held separately to the Organisational Risk Register due to the evolving position. The Covid-19 Risk log is updated weekly following Gold meetings and shared with Board Members through the Admincontrol portal. As with the previously established Covid-19 Risk Log, when Gold Command is stood down, any relevant legacy risks will be transferred to the Organisational Risk Register as appropriate.

The Covid-19 Gold Risk Log includes a Datix ID which cross-references to risks that have remained on the Organisational Risk Register since their transfer in July 2020 from the previous Gold Command Risk Log. Integrated Locality Groups have considered the risks on the current Covid-19 Gold Command Risk Log and have only escalated risks specific to their localities to avoid duplication.



3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 NEW RISKS TO THE ORGANISATIONAL RISK REGISTER (RATED 15 OR ABOVE)

Integrated Locality Groups

- **Bridgend Locality Group**

No new risks added for November Management Board.

- **Merthyr Cynon Locality Group**

- Datix ID 4332 – “Anticipated Impact of the Opening of the Grange University Hospital (GUH)” – Rated 25.

- **Rhondda Taf Ely (RTE) Locality Group**

In October Management Board it was noted that RTE high level risks will be reported to the November Management Board meeting following a triage of high level risks within the locality group. The new risks triaged for escalation are:

- Datix ID 4281 – “Delivery of Rehabilitation for repatriated major trauma patients”.
- Datix ID 4248 – “Care of Patients with Mental Health needs on Community Hospital Sites”.
- Datix ID 4401 – “Risk of absconding on Ward 23”.
- Datix ID 1793 – “Provision of negative pressure rooms in CTMUHB in line with WHC(2018)033”.
- Datix ID 816 – “Follow up capacity and clinic cancellations (FUNB)”.
- Datix ID 4292 – “Long Waiting Times and large backlog for Cardiac Echo”.

Further triage on RTE high level risks will be undertaken and further updated at the December Management Board meeting.

Facilities Risks

- Datix ID 4272 – “Replacement of Linen Monorail Sorting System and inclines due to age”.
- Datix ID 4273 – “Inappropriate Equipment being placed in Clinical Bag Waste”.
- Datix ID 3133 – “Due to capacity issues to deal with Covid-19 staff are not attending Medical Gas Safety Training and courses are being rescheduled”.
- Datix ID 4285 – “Replacement of the Auto Remat system for processing clothing and coats due to age”.
- Datix ID 4286 – “Telecommunications Upgrade required with Operational Components for Cardiac Arrest and Emergency Fire Numbers”.

- Datix ID 4306 – “Potential Cyber Security Risk relating to a brand Medical Device Monitoring System”.

Informatics Risks

- Datix ID 4418 – “The ICT Digital Strategy Review”.

Fire Safety Related Risks

- Datix ID 4392 – “Site Specific Fire Documents requiring updating on some sites”.
- Datix ID 4417 – “Management of Security Doors in all Hospital Settings”.
- Datix ID 4356 – “Overdue Fire Risk Assessments”.
- Datix ID 4360 – “Changing the use of rooms/departments without input /advice from the relevant fire advisor”.

3.2 RISKS WHERE THE RISK RATING INCREASED DURING THE PERIOD

No risks were increased in terms of risk rating since the last report to Board.

3.3 RISKS WHERE THE RISK RATING DECREASED DURING THE PERIOD

No risks were decreased in terms of the risk rating since the last report to Board.

3.4 CLOSED RISKS

The following risks were closed during the period:

- Datix ID 4097-“Failure to meet Fire Safety Standards across the Health Board”. This risk was closed as it has been replaced by the above new risks 4392, 4417, 4356 and 4360 which better articulate the fire risks within the Health Board.
- Datix ID 3915 – “Ligature Points – Inpatient Rehabilitation Services – Merthyr & Cynon”. This risk has been amalgamated within an ILG wide risk on Ligature Points – Datix Risk ID 4253.



3.5 ORGANISATIONAL RISK REGISTER - VISUAL HEAT MAP BY DATIX RISK ID:

Consequence	5			4105 4186 2725 4248	3856 3858 4306	4154 4100 4080 3826	4253 4331 4071		
	4					4069 4070 4103 4109 3368 3584 4338 2987 4235 3682 3088 4273 3183 4285 4356 4401 4292	4149 4113 4116 2796 3585 4337 3562 4294 3958 3011 3654 4272 4392 4360 4417 816 588	4060 4095 4106 4157 4156 4115 3183 4332 1793	
	3							4148 4150 3899 632 3638 4418	3072 4110 3698 3685 4286 4281
	2								
	1								
	CxL	1	2	3	4	5	Likelihood		

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 /	There is no direct impact on resources as a result of the activity outlined in this report.



Impact	
Link to Main Strategic Objective	To provide strong governance and assurance
Link to Main WCFG Act Objective	Service delivery will be innovative, reflect the principles of prudent health care and promote better value for users

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 and updated risks.
- **NOTE** – the progress made against the risk journey milestones at Appendix 2.