AUDIT & RISK COMMITTEE

ORGANISATIONAL RISK REGISTER

Date of meeting	08/02/2021

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	December 2020	RISKS REVIEWED
Management Board	January 2021	RISKS REVIEWED
Health Board Meeting	28th Janaury 2021	RISKS APPROVED

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

1. SITUATION/BACKGROUND

1.1 The purpose of this report is for the Committee to review and discuss the organisational risk register and consider whether the risks escalated to the Organisational Risk Register have been appropriately assessed.

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 -** 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 and monitored weekly based on the risks to delivery of the CTMUHB COVID-19 Strategic Aims: 1) Prevent deaths from COVID-19 (2) Protect the health and people in CTM communities (3) Protect the health and wellbeing of staff in our public service. 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.

2.2 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.

2.3 Further progress has been made since the last report received in December 2020 to include;
- A comprehensive review of the CTMUHB Risk Management Strategy, Risk Management Policy and Risk Assessment Procedure which are due for approval by the Management Board and Health Board as appropriate in January 2021.
- A peer review of Estates Risks in accordance with the Risk Management Strategy.
- During December 2020, risk leads were asked to undertake a review of all risks to ensure action plans are reviewed particularly where trends have remained stagnant. It is important to note that

some risks have been updated (indicated in red in Appendix 1), however, this task has been impacted by the Covid-19 resurgence as staff were of course prioritising the clinical/operational focus needed at this time.

- The heat map in previous reports was not presented in its clearest form and therefore this has been updated in this report to include existing and new risks.
- A review of the assignment of risks to Board Committees has been reviewed and proposed changes indicating in red in Appendix 1.
- The Risk Management Improvement Plan has been updated and is included as Appendix 2.

2.4 An Internal Audit on Risk Management was undertaken in November/December 2020. The final report will be received at the Audit & Risk Committee in February 2021 under a separate agenda item.

3   KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 NEW RISKS

- Datix Risk ID 4458 – Ambulance Handover Times.
- Datix Risk 4500 - There is a risk to the delivery of high patient care due to the difficult in recruiting sufficient numbers of registered therapists and health scientists.
- Datix Risk ID 3656 – Health Surveillance.
- Datix Risk ID 4491 – Failure to meet the demand for patient care at all points of the patient journey.

3.2 CHANGES TO RISK RATING

a) Risks where the risk rating INCREASED during the period
No risks were increased in terms of the risk rating.

b) Risks where the risk rating DECREASED during the period

- Datix Risk ID 4273 –Inappropriate equipment being placed in clinical bag waste. Risk rating decreased from 16 to 8 and therefore has been de-escalated from the Organisational Risk Register.
- Datix Risk ID 4338 – Asbestos content in the roof of main building. Risk rating decreased from 16 to 12 and therefore has been de-escalated from the Organisational Risk Register.
- Datix Risk ID 4149 - Failure to sustain Child and Adolescent Mental Health Services. Risk rating decreased from 20 to 16. Remains on the Organisational Risk Register.

3.3 CLOSED RISKS

- Datix Risk ID 4272 – Replacement of Linen Monorail sorting system. Closed as target risk level met.

- Datix Risk ID 4154 – Financial Impact of Covid-19 including Resetting CTM on the 2020/2021 In Year Financial Position. Closed as target risk level met.
- Datix Risk ID 4095 – Lack of Control and Capacity to accommodate all hospital follow up outpatient appointments, Datix Risk ID 4100 – Failure to treat patients in a timely manner resulting in potential avoidable harm and Datix Risk ID – 4069 – Failure to achieve Referral to Treatment Time. These three risks concerned range of issues around lack of capacity for outpatient appointments, failure to treat patients in a timely manner and failure to achieve referral to treatment times. Given the interwoven nature of the issues – all concern the patient journey from outpatients to operation date – it was felt that the amalgamation into one risk which outlines concerns and actions in one place would be simpler to understand and to update.
  The new risk which amalgamates these issues included in the Register as number 4491.

3.4 Organisational Risk Register - Visual Heat Map by Datix Risk ID:

Consequence	1	2	3	4	5
5			4105 4186 2725 3856 3858	4080 3826 4253 4331 1793	
4				4070 4149 / 4103 4113 / 4109 4116 / 3368 588 / 3584 2796 / 2987 3585 / 4235 4337 / 3682 3562 / 3088 4294 / 4115 3958 / 4148 3011 / 3133 3654 / 4285 4106 / 4417 4156 / 4360 4157 / 816 4392 / 3656 4356 / 4491 4401 / 4292 4500	4060 3183 4332 4458 4071
3					4150 3899 632 3638 3072 4110 3698 3685 4286 4306 4418 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 / 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 Committee are asked to:
- **REVIEW** the detailed Organisational Risk Register at Appendix 1.
- **NOTE** the recommendations in relation to New Risks and updated risks.
- **NOTE** the Risk Management Improvement Plan at Appendix 2.