	AGENDA ITEM
	4.2

AUDIT & RISK COMMITTEE

ORGANISATIONAL RISK REGISTER

Date of meeting	4/10/2021

FOI Status	Open

If closed please indicate reason	Not applicable – Public 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

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

Committee/Group/Individuals	Date	Outcome
Service, Function and Executive Formal Review	July 2021	RISKS REVIEWED
Management Board	25th August 2021	REVIEWED AND MANAGEMENT SIGN OFF RECEIVED

ACRONYMS	
CSGs	Clinical Service Groups
ILG's	Integrated Locality Groups

1. SITUATION/BACKGROUND

1.1 The purpose of this report is for the Audit & Risk Committee 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.

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 – presentation on the agenda to capture progress, delivered by the ILG Nurse Director.

  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.

- 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 2021 and will continue beyond that date if required. 240 members of staff trained from January to August 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

MATERNITY RISKS:
- Datix ID 4789 – Number of overdue Serious Incidents awaiting completion. Risk Rated as a 15.

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 4752 – Maternity: Lack of Pharmacy clinical service, medicines governance and medicines safety. Risk rated as a 16.

3.2 **CHANGES TO RISKs**

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

The update to this risk was approved retrospectively following a request to review scoring at the Management Board meeting in August 2021:

- Datix ID 4103 – Sustainability of a safe and effective Ophthalmology Service. Risk increased from a 16 to a 20.

c) Risks where the risk rating DECREASED during the period
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. Risk reduced from a 16 to a 12.

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.

3.3 **CLOSED RISKS**
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 ID3682 - 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.

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

Consequence		1	2	3	4		5
	5			4253 3337 4620 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 4281 4699 1133 4752 4676 4679 4776	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 4691
	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 risks escalated to the Organisational Risk Register at Appendix 1.
- **Consider** whether the Committee can seek assurance from the report that all that can be done is being done to mitigate the risks.
- **Note** the Risk Management Milestones update aligned with the Targeted Intervention programme – see Appendix 2.