



AGENDA ITEM

5.1

AUDIT & RISK COMMITTEE

ORGANISATIONAL RISK REGISTER

Date of meeting	12 th December 2022
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	Chief Executive
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	October 2022	RISKS REVIEWED
Executive Leadership Group	7 th November 2022	RISKS REVIEWED AND MANAGEMENT SIGN OFF RECEIVED
Quality & Safety Committee (Assigned risks only)	15 th November 2022	RISKS REVIEWED

ACRONYMS

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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 are in accordance with the Risk Management Strategy.

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

- 2.1 The risk updates for this period has been impacted by the implementation of the new Care Group Model. The Executive Leadership Group supported "Guiding Principles: Quality Governance & Accountability during the Operating Model Transition" where the following transitional arrangements have been agreed:

- **Organisational Risk Register:** Workshop approach to realign risks on the Organisational Risk Register led by Nurse Directors. Timeframe: Workshop Sept/Oct 22. Realignment to complete by 31.1.2023.
- Central Quality Governance Team to provide a report to Care Groups which will contain all **Datix Legacy Information** for Risk, Incidents, Claims, Complaints etc. The Nurse Directors to then undertake an exercise to align activity/data to Care Group Model – Timeframe for alignment 31.1.2023.

The Assistant Director of Governance & Risk, along with the Chief Operating Officer and/or Deputy Chief Operating Officers, has started to meet with Care Groups during October and November to review risks in terms of alignment to the new Care Group Model. The Organisational Risk Register will continue to be updated to reflect the changes being made as a result of this activity.

- 2.2 The following progress has been made since the last report:
- Monthly Risk Management Awareness Sessions (Virtually via Teams). The monthly sessions are set in the calendar until the end of 2022 and will continue beyond that date if required. 344 members of staff trained to date.
 - Risks on the organisational risk register have been updated as indicated in **red**.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 NEW RISKS

Quality Governance: Concerns and Claims

- Datix ID 5254 – Failure to manage redress cases efficiently and effectively in respect of the Duty of Candour. Risk scored as a 20.

Patient, Care and Safety Function - Nursing

- Datix ID 5267 - There is a risk to the delivery of quality patient care due to difficulty recruiting & retaining sufficient numbers of nurses. Risk scored as 16.

Digital & Data

- Datix ID 5276 - Failure to deliver replacement Laboratory Information Management System, LINC Programme, by summer 2025. Risk rated as a 20.

3.2 **CHANGES TO RISKS**

a) Risks where the risk rating INCREASED during the period

Health, Safety & Fire

- Datix ID 4780 – Patient Handling Training Risk Score increased from a 16 to a 20.

Quality Governance (Compliance)

- Datix ID 4922 – Covid-19 Inquiry Preparedness - Information Management, Risk Score increased from a 16 to a 20.

b) Risks where the risk rating DECREASED during the period

Health, Safety & Fire

- Datix ID 4356 – Overdue Fire Risk Assessments. Risk Score decreased from a 20 to a 16.

3.3 **CLOSED RISKS FROM THE ORGANISATIONAL RISK REGISTER**

Patient, Care and Safety Function - Nursing

- Datix ID 4106 - Increasing dependency on agency staff cover which impacts on continuity of care, patient safety.
- Datix ID 4157 - There is a risk to the delivery of high quality patient care due to the difficulty in recruiting and retaining sufficient numbers of registered nurses and midwives.

Rationale for closure and/or removal from the Risk Register is captured in Appendix 1.

3.4 **DISCUSSION POINTS**

3.4.1 **Emerging Risks**

The Assistant Director of Governance & Risk has been made aware of the following emerging risks in the service that are likely to be escalated to a future Organisational Risk Register return:

Central Support Functions:

- **Population Health** - Permanency of service critical staff to support the Covid-19 Vaccination Programme
- **Medical Directorate** - Escalation of a risk relating to Clinical Policies.
- **Digital & Data** - MS Sustainability, Unsupported server operating systems, Safe transition from paper to digital record.

Care Groups

- **Unscheduled Care Group:**
 - Lack of funding for priority winter schemes within 2022-23 winter plan
 - Non-resilient NIV Pathway
 - Lack of acute frailty assessment services/pathways
 - Lack of resilience of vascular pathway
 - Absence of D2RA Model and pathways.
- **Diagnostics, Therapies and Specialties**
 - A review of the current overarching Pathology risk as well as other emerging risks in this area including significant concerns around mortuary capacity.
 - Radiology risks.
- **Primary Care and Community** - GMS Sustainability

3.4.2 Updates Received since the Executive Leadership Group

Since the Executive Leadership Group reviewed the Organisational Risk Register at its meeting on the 7th November 2022, updates have been received from the Digital & Data Function which have been captured in this update.

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

Consequence	5	Yellow	Orange	4253	5254	Red	
				3337	4080		
				4768	3826		
				4772	4664		
				2987	4887		
				3993	5214		
	4	Yellow	Orange	Red	4149	4152	4491
					4458	3585	4632
					4148	3133	4071
					4337	2787	4721
					3008	1133	4103
					4743	4752	4841
4798					4679	4827	
4906					4922	5153	
4908					4479	5154	
4809					4940	5036	
5014	4315	4907					
4722	4417	4780					
4753	5267	4922					
4356		5276					
3	Green	Yellow	Orange	Red	3638	4672	
					4691	4671	
					4732	4512	
					4920	4590	
					5207	4691	
					4971	2808	



						4699	5040 4217
	2						
	1						
CxL	1	2	3	4	Likelihood		5

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
Related Health and Care standard(s)	Governance, Leadership and Accountability If more than one Healthcare Standard applies please list below:
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below) If no, please provide reasons why an EIA was not considered to be required in the box below. Not applicable for the Risk Register item.
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 Goals	Improving 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.