**Bwrdd Iechyd Prifysgol
Cwm Taf Morgannwg
University Health Board**

AGENDA ITEM
3.2.2a

PEOPLE & CULTURE COMMITTEE

ORGANISATIONAL RISK REGISTER

Date of meeting	10/08/2022

FOI Status	Public

If closed please indicate reason	Not Applicable

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

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
Committee/Group/Individuals	**Date**	**Outcome**
Service, Function and Executive Formal Review	June 2022	RISKS REVIEWED
Strategic Leadership Group	Via Email	RISKS REVIEWED
Executive Leadership Group	18.07.2022	RISKS REVIEWED AND MANAGEMENT SIGN OFF RECEIVED
Audit & Risk Committee	22.08.2022	RISKS REVIEWED

ACRONYMS	
Nil	

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.

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. 323 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**

Rhondda Taf Ely Locality
- Datix ID 4722 - Senior Medical Workforce Shortfall. Risk scored at a 16.

3.2 **CHANGES TO RISKs**
a) Risks where the risk rating <u>INCREASED</u> during the period
Nil as assigned to this Committee.

b) Risks where the risk rating <u>DECREASE</u>D during the period
Nil as assigned to this Committee.

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

Therapies and Health Sciences
- Datix ID 4500 - There is a risk to the delivery of high quality patient care due to the difficulty in recruiting sufficient numbers of registered AHPs.

3.4 **DISCUSSION POINTS**

Strategic Leadership Group Action
Whilst recognising the improvement to date the SLG have been asked to reinforce a focus on target date reviews being undertaken robustly and in a timely manner.

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:
- Permanency of service critical staff to support the Covid-19 Vaccination Programme

- The Executive Medical Director is exploring the escalation of a risk relating to Clinical Policies.
- The Chief Operating Officer has recently undertaken a review of the Risk Register and work should be completed this month to ensure that the issues reported are appropriate and equitable.

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

Consequence		1	2	3	4	5
	5				4080	
	4				4106 1133 4157 4679 4722	
	3					3638 4888
	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.

Organisational Risk
Register

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People & Culture
Committee
10th August 2022