

AGENDA ITEM

5.2

PLANNING, PERFORMANCE & FINANCE COMMITTEE
ORGANISATIONAL RISK REGISTER

| | |
|------------------------|-------------|
| Date of meeting | 24/08/.2021 |
|------------------------|-------------|

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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 |
| Presented by | Georgina Galletly, Director of Corporate Governance |
| Approving Executive Sponsor | Director of Corporate Governance |

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|-----------------------|-----------------------|
| 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 | July 2021 | RISKS REVIEWED |
| Management Board | 21 st July 2021 | MANAGEMENT SIGN OFF RECEIVED |
| Audit & Risk Committee | 17 th August 2021 | RISKS REVIEWED |

| ACRONYMS | |
|-----------------|----------------------------|
| CSGs | Clinical Service Groups |
| ILG's | Integrated Locality Groups |

1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is to present the high level organisational risks included on the Organisational Risk Register which have been assigned to the Committee, and highlight the management actions being taken to manage or mitigate these high level risks.
- 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 with the target of October 2021 for all risks held on the Datix system to have been reviewed.
 - The monthly risk management awareness sessions held virtually via Teams are being well received. 193 members of staff have received the Risk Training Awareness Session - January to July 2021.
 - 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

No new risks added which are assigned to this Committee this period.

3.2 CHANGES TO RISK RATING

a) Risks where the risk rating INCREASED during the period

Bridgend Locality

1. Datix ID 4149 - Failure to sustain Child and Adolescent Mental Health Services. Risk increased from a 16 to a 20 due to the increased escalation status of Ty Llidiard.

b) Risks where the risk rating DECREASED during the period

No risks assigned to this Committee were decreased in terms of risk rating this period.

3.3 CLOSED RISKS

No risks assigned to this Committee were closed this period.

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

| | | | | | | |
|-------------|---|------------|---|---|------|--------------|
| Consequence | 5 | | | | 4149 | |
| | 4 | | | | 4458 | 4060 4629 |
| | 3 | | | | | |
| | 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 is asked to:

- **Review** the Planning, Performance & Finance 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.