![GIG CYMRU NHS WALES logo] Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg University Health Board

AGENDA ITEM
4.1

PLANNING, PERFORMANCE & FINANCE COMMITTEE

ORGANISATIONAL RISK REGISTER

Date of meeting	28th February 2023

FOI Status	Open

If closed please indicate reason	Not a applicable public meeting

Prepared by	Cally Hamblyn, Assistant Director of Governance & Risk
Presented by	Cally Hamblyn, Assistant Director of Governance & Risk
Approving Executive Sponsor	Paul Mears, 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	December 2022 / January 2023	RISKS REVIEWED
Executive Leadership Group	16.1.2023	RISKS REVIEWED AND MANAGEMENT SIGN OFF RECEIVED
Audit & Risk Committee	13.2.2023	RISKS REVIEWED

ACRONYMS

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 assigned 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 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: Realignment to complete by 31.1.2023. Assistant Director of Governance and Risk and COO Team met with each Care Group Leadership Group to review and agree assigned risks on the Organisational Risk Register.

2.2 Care Group Directors have undertaken the initial alignment of risks on the Organisational Risk Register to the new Care Group model and are in the process of undertaking detailed reviews on risks assigned to their areas.

2.3 Service / Winter pressures along with planning to respond to the impact of Industrial Action has posed significant challenges which should be recognised in light of the ability to keep pace with the timeframes to undertake this review and update risks this period.

2.4 The Assistant Director of Governance & Risk and Chief Operating Officer are holding a workshop with Executive Leads in January 2023 to review the Organisational Risk Register in terms of consistency of risk scoring, robustness of narrative and review of actions being taken to mitigate risks.

2.5 Monthly Risk Management Awareness Sessions (Virtually via Teams). The monthly sessions are set in the calendar until the end of 2023. 369 members of staff trained to date.

2.6 Risks on the organisational risk register have been updated as indicated in red.

Organisational Risk
Register – PPF Assigned
Risks

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3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 NEW RISKS
Nil as assisgned to this Committee.

3.2 CHANGES TO RISKs
a) Risks where the risk rating INCREASED during the period
Nil as assisgned to this Committee.

b) Risks where the risk rating DECREASED during the period
Nil as assisgned to this Committee.

3.3 CLOSED RISKS FROM THE ORGANISATIONAL RISK REGISTER
People and Culture Directorate
Nil as assisgned to this Committee.

3.4 DISCUSSION POINTS

Changes to Risks
The Executive Medical Director is initiating a review of Datix Risk ID 4590 - Critical Care Pharmacist Resource and Datix Risk ID 5214 - Critical Care Medical Cover, with the view to amalgamate these two risks.

Emerging Risks
As part of the review of current risks following alignment to the new Operating Model new risks and changes to risks are in development to come forward to a future iteration of the Organisational Risk Register.

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

Consequence		1	2	3	4	5
	5			4772 5207		4149 4458
	4				4149 4458	4491 5153 5154 4071
	3					
	2					
	1					
CxL		1	2	3	4	5
					Likelihood	

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 **all** 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.