

AGENDA ITEM

3.3

POPULATION HEALTH & PARTNERSHIPS COMMITTEE
ORGANISATIONAL RISK REGISTER – HEALTH SYSTEM FOCUSED RISKS

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| Date of meeting | 23/11/2020 |
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| FOI Status | Open |
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| If closed please indicate reason | N/A 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 |
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| Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group) | | |
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| Committee/Group/Individuals | Date | Outcome |
| Service, Function and Executive Review | September / October 2020 | RISKS AMENDED |
| Management Board | 22.10.2020 | ENDORSED |
| People & Culture Committee | 28.10.2020 | REVIEWED |
| Health, Safety & Fire Sub Committee | 29.10.2020 | REVIEWED |
| Quality & Safety Committee | 18.11.2020 | REVIEWED |

| ACRONYMS | |
|-----------------|-----------------------------|
| ILG's | Integrated Locality Groups |
| IMTP | Integrated Medium Term Plan |



1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is to present the high level organisational risks that have a health system focus, 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.
- 1.3 There are currently no risks on the Organisational Risk Register assigned specifically to the PCPHPC, and therefore the Committee is asked to consider what risks it would like to receive from the Organisational Risk Register going forward.
- 1.4 The approach taken in the presentation of this report was to extract health system focussed risks and the Committee are asked to consider if this approach is acceptable and provides the required assurance, or whether it only needs to receive risks if specifically assigned to the Committee.

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

- 2.1 **Gold Command – Covid-19 Risks** - As Gold Command was re-established in September 2020 in response to a rise in infection rates in the CTM communities, a COVID-19 Gold Command Risk Log has been developed and monitored weekly based on the risks to delivery of the CTMUHB COVID-19 Strategic Aims: 1) Prevent deaths from COVID-19 (2) Protect the health and people in CTM communities (3) Protect the health and wellbeing of staff in our public service. This risk log is being held separately to the Organisational Risk Register due to the evolving position. The Covid-19 Risk log is updated weekly following Gold meetings and shared with Board Members through the Admincontrol portal. As with the previously established Covid-19 Risk Log, when Gold Command is stood down, any relevant legacy risks will be transferred to the Organisational Risk Register as appropriate.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

The Organisational Risk Register will be received by the Management Board, Board Committees as appropriate and the Health Board meetings. The Board and its Committees are asked to scrutinise risks and satisfy themselves with regard to the adequacy of management

actions, and the control measures being implemented. Committees and the Health Board are also requested to scrutinise decisions taken to escalate, de-escalate or close risks on the Organisational Risk Register.

3.1 **NEW Risks to the Organisational Risk Register (Rated 15 or above)**

Integrated Locality Groups (ILG's)

The following risks have been escalated to the Organisational Risk Register following a review and triage of high level risks impacting the following locality groups. These reflect risks specific to the locality group which are not already captured as an organisational wide risk and/or a risk captured on the Gold Command Covid-19 Risk Log.

Bridgend Locality Group:

- Datix ID: 3584 – “Neonatal Capacity/Stabilisation cot at Princess of Wales”.
- Datix ID: 3585 – “Princess of Wales Emergency Department Hygiene Facilities”.
- Datix ID: 3698 – “Waiting List for Autism Diagnostic Observation Schedule (ADOS) assessments and Attention Deficit Hyperactivity Disorder (ADHD) medicals over 1 year”.
- Datix ID: 3826 “Emergency Department Overcrowding”.
- Datix ID: 4253 – “Ligature Points – Inpatient Services”.
- Datix ID: 4337 – “IT Systems”.
- Datix ID: 4338 – “Asbestos Content in roof of main building”.

Merthyr & Cynon Locality Group:

- Datix ID 3915 – “Ligature Points – Inpatient Rehabilitation Services”
- Datix ID 3562 – “Health & Safety risk of patients and staff in A&E Corridor at Prince Charles Hospital”.
- Datix ID 2987 – “Fire enforcement order is in place for the ground and first floor PCH due to inadequate fire compartments to prevent spread of fire, smoke and noxious gasses”.
- Datix ID 4331 – “Covid 19 emergency flow and impact of RGH”.
- Datix ID 4294 – “Long waiting times and large backlog of patients awaiting Cardiac Echo”.
- Datix ID 4235 – “Cancer Performance – Gastroenterology Outcome of Covid-19”.
- Datix ID 3958 – “Elective patient’s surgery cancelled when high level bed pressures are experienced”.
- Datix ID 3685 – “Inadequate Service for pregnant women with substance misuse problems”.
- Datix ID 3682 – “Risk to Obstetric Theatres National Standards”.

- Datix ID 3011 – “Non-compliance with appropriate fetal growth detection and management”.
- Datix ID 3008 – “Risk of injury due to poor compliance with manual handling training”.
- Datix ID 3654 – “Gynaecology Cancer Service”.

3.2 Risks where the risk rating **INCREASED** during the period

- Datix Risk ID: 4149 – “Failure to sustain Child and Adolescent Mental Health Services” – increased from a 16 to a 20. The Bridgend ILG Leadership Team have placed the service into Internal Enhanced Monitoring and Support.
- Datix Risk ID: 4116 – “Organisational Reputation - Lack of confidence in the services and care provided by the organisation” - the risk rating was increased from 12 to 16 during the period in response to the likelihood increasing from “Possible” to “Likely” as a result of the Health Board needing to ensure it maintains public confidence in light of the increase in Covid-19 infections in its communities through robust communication and messaging.
- Datix Risk ID: 4253 – “Ligature Points – Inpatient Rehabilitation Services” increased from a 15 to a 20 during the period.

3.2 Risks where the risk rating **DECREASED** during the period

No risks were decreased in terms of the risk rating.

3.3 Closed Risks

No risks were identified for closure.

4. IMPACT ASSESSMENT

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| 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) |
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| Legal implications / impact | There are no specific legal implications related to the activity outlined in this report. |
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| Resource (Capital/Revenue £/Workforce) implications / Impact | There is no direct impact on resources as a result of the activity outlined in this report. |
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| Link to Main Strategic Objective | To provide strong governance and assurance |



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| Link to Main WBFG Act Objective | Service delivery will be innovative, reflect the principles of prudent health care and promote better value for users |
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5. RECOMMENDATION

5.1 The Committee is asked to:

- **NOTE** the risk management improvement journey included in section 2
- **REVIEW** – the Organisational Risk Register and the assessment and management of individual risks.
- **CONSIDER** - what risks the PCPHP Committee would like to receive from the Organisational Risk Register if no risks are specifically assigned to the Committee.