

AGENDA ITEM

5.1

QUALITY & SAFETY COMMITTEE
ORGANISATIONAL RISK REGISTER

| | |
|------------------------|-----------------------------|
| Date of meeting | 16 th March 2023 |
|------------------------|-----------------------------|

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|-------------------|------|
| FOI Status | Open |
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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 | Cally Hamblyn, Assistant Director of Governance & Risk |
| Approving Executive Sponsor | Paul Mears, Chief Executive |

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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 | February / March 2023 | RISKS REVIEWED |
| Executive Leadership Group | 6 th March 2023 | RISKS REVIEWED AND MANAGEMENT SIGN OFF RECEIVED |

| ACRONYMS | |
|-----------------|--|
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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 have been appropriately assessed.

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

- 2.1 Following discussion at the Operational Management Board in February 2023, Care Groups are undertaking to review all risks under their areas of responsibility, initial focus will be on the high level risks escalated to the Organisational Risk Register.
- 2.2 The Assistant Director of Governance & Risk and Chief Operating Officer held 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. Executive Leads agreed to undertake a robust review of risks assigned to them to ensure there is consistency and moderation in terms of risk scoring.
- 2.3 Monthly Risk Management Awareness Sessions (Virtually via Teams). The monthly sessions are set in the calendar until the end of 2023. **378** members of staff trained to date.
- 2.4 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

People & Culture Portfolio

- Datix ID 4679 - Absence of a TB vaccination programme for staff. Risk re-escalated in March 2023. Risk score of 16.

3.2 CHANGES TO RISKS

a) Risks where the risk rating **INCREASED** during the period

Nil this period.

b) Risks where the risk rating **DECREASED** during the period

- Datix ID 4722 - Senior Medical Workforce Shortfall - Adult Mental Health. Risk score decreased from a 16 to a 12.
- Datix ID 3131 - Mortuary Capacity. Risk score decreased from a 20 to a 16.
- Datix ID 5254 - Failure to manage Redress cases efficiently and effectively in respect of Duty of Candour. Risk score decreased from a 20 to a 16.
- Datix ID 5036 - Pathology services unable to meet current workload demands. Risk score decreased from a 20 to a 16.
- Datix ID 2721 - Capacity to deliver POCT training to Health Board Nursing Staff. Risk score decreased from a 16 to an 8. De-escalated

from the Organisational Risk Register. Rationale captured in Appendix 1.

- Datix ID 4149 – Failure to sustain Child and Adolescent Mental Health Services. Risk score decreased from a 16 to a 12. De-escalated from the Organisational Risk Register. Rationale captured in Appendix 1.
- Datix ID 4908 - Failure to manage Legal cases efficiently and effectively. Risk score decreased from a 16 to a 12. De-escalated from the Organisational Risk Register. Rationale captured in Appendix 1.
- Datix ID 4940 - Delay to full automated Implementation of Civica. Risk score decreased from a 16 to a 12. De-escalated from the Organisational Risk Register. Rationale captured in Appendix 1.

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

- Datix ID 4971 – Adult Special Care Dentistry. Risk Closed. Rationale captured in Appendix 1.

3.4 **DICUSSION POINTS**

- Updates to the following risks were received post ELG meeting on the 6th March, however, have been signed off by the Executive / Director lead:
 - Datix ID 4971 – Adult Special Care Dentistry
 - Datix ID 4632 - Provision of an effective and comprehensive stroke service across CTM (encompassing prevention, early intervention, acute care and rehabilitation)
 - Datix ID 5214, Critical Care Medical Cover
 - Datix ID 4080, Failure to recruit sufficient medical and dental staff
 - Datix ID 3638, Pharmacy & Medicines Management - Training & Development Infrastructure
 - Datix ID 4590, Critical Care Pharmacist Resource

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

| | | | | | | | | |
|-------------|-----|------------|---|------------------------------|--|--|--|----------------------|
| Consequence | 5 | | | 3337 4772 5207 5323 | 4080 3826 4887 5214 | | 4743 | |
| | 4 | | | | 4458 4148 4798 4906 5014 4679 5036 | 4152 3585 3133 1133 4479 3131 5254 | 4491 4632 4071 4721 4103 4217 4907 4922 5267 | |
| | 3 | | | | | | 4691 4732 4920 3993 | 4512 4590 2808 |
| | 2 | | | | | | | |
| | 1 | | | | | | | |
| | CxL | 1 | 2 | 3 | 4 | | 5 | |
| | | Likelihood | | | | | | |

4. IMPACT ASSESSMENT

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|---|---|
| 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.