



AGENDA ITEM

5.1

QUALITY & SAFETY COMMITTEE

ORGANISATIONAL RISK REGISTER

Date of meeting	24 th May 2023
FOI Status	Public
If closed please indicate reason	Not 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 & APPROVAL

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Service, Function and Executive Formal Review	April / May 2023	RISKS REVIEWED
Operational Management Board – Phase 1 Risks Scoring 20 and above	19 th April 2023	RISKS REVIEWED
Executive Leadership Group	15 th May 2023	REVIEWED AND MANAGEMENT SIGN OFF RECEIVED

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 have been appropriately assessed.

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

- 2.1 At the Operational Management Board meeting on the 19th April 2023, a targeted review of risks scoring 20 and above (escalated to the Organisational Risk Register) was undertaken and Care Group Director Teams were tasked with specific review actions. Improvement in terms of mitigation, moderated scoring and timeframes will hopefully be evident over the next few reporting periods.
- 2.2 The Care Group Highlight Reports received at the Operational Management Board will now include a specific risk update in terms of 'new, closed, de-escalated' risks for the Organisational Risk Register.
- 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. There are targeted in person sessions with Primary Care Teams scheduled during May 2023.
- 2.6 Risks on the organisational risk register have been updated as indicated in **red**.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 Principal / Strategic Risks (Board Assurance Framework)

The organisational risks captured in Appendix 1 are aligned to the Principal/Strategic Risks reported to the Board via the Board Assurance Framework Report. These risks as assigned to the Quality & Assurance Committee are:

- Risk No. 1 – Sufficient capacity to meet emergency and elective demand. Risk score of 20.
- Risk No. 2 – Ability to deliver improvements which transform care and enhance outcomes. Risk score of 16.

3.2 Organisational Risks (Score of 15 and above)

3.2.1 NEW RISKS

Nil this period.



3.2.2 **CHANGES TO RISKS**

a) Risks where the risk rating INCREASED during the period Digital and Data

- Datix ID 4671 - Lack of a resilient and performant Digital Network Infrastructure and Assets. Risk increased from a 15 to a 16.

b) Risks where the risk rating DECREASED during the period Patient Care & Safety – Central Function

- Datix ID 4908 – Failure to Manage Legal cases efficiently and effectively. Risk de-escalated from a 16 to a 12 in March 2023. Further assurance was sought from Board Members and therefore further rationale has been captured to support de-escalation.

Medical Directorate – Central Function

- Datix ID 5214 – Critical Care Medical Cover. Risk score reduced from a 20 to a 12. Risk was robustly reviewed by the Medical Director this period where risks 4590 and 4798 were amalgamated.

Diagnostics, Therapies & Health Sciences

- Datix ID 4920 - Capacity within the ED/ Medical/ Rehabilitation and Orthopaedic Inpatient Occupational Therapy Service within Princess of Wales. Risk score reduced from a 15 to a 12.

Children and Families Care Group

- Datix ID 5014 - Care of Obstetric & Gynaecology patients in the ED at the Royal Glamorgan Hospital. Risk score reduced from a 16 to a 12. This risk update was captured post ELG meeting on the 15th May 2023.

Digital & Data

- Risk ID 4887 - Retrieval and filing of case notes in the POW Medical Records Library. Risk score reduced from a 20 to a 15.

Rationale for changes captured in Appendix 1.

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

All Care Groups

- Datix ID 4253 - Ligature Points - Inpatient Services. Risk closure placed on hold in March 2023 as further assurance was required in terms of the completion of Capital and Estates actions. This has been received and is captured in Appendix 1. Risk Closed.

Medical Directorate – Central Function and Diagnostics, Therapies and Specialties

- Datix ID 4590 – Critical Care Pharmacist Resource. Risk Closed.

- Datix ID 4798 - Unsafe therapy staffing levels for critical care services at Prince Charles Hospital, Royal Glamorgan Hospital and Princess of Wales Hospital. Risk Closed.

Unscheduled Care Group

- Datix ID 4512 - Care of patients with mental health needs on the acute wards. Risk Closed.

Diagnostics, Therapies and Specialties Care Group

- Datix ID 5323 - Fluoroscopy Room has become Obsolete. Risk Closed.

Rationale for closure captured in Appendix 1.

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

Consequence	5			3337 4772 3993 4887	4080 3826 5276			
	4				4458 4148 4337 4743 4906 4679 3131	4152 3585 3133 1133 4479 5254 5036	4491 4632 4071 4103 4907 4922 5267	
	3						4691 4732 5207	2808 4217
	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 <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.