Sandwell and West Birmingham Hospitals **NHS**
NHS Trust

Report Title	Monthly Risk Register Report		
Sponsoring Executive	Kam Dhami, Director of Governance		
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Meeting	Trust Board	Date	7th March 2019

1. Suggested discussion points *[two or three issues you consider the Board should focus on]*

To be a risk aware organisation active mitigating and monitoring needs to be happening, allowing Groups and directorates to be assured that risks identified are being managed and addressed not just logged. CLE time was devoted to this area last week and generated a useful discussion on getting material out of Safeguard, on how Groups close the loop, on what words and language means, and how we ensure that high impact local risks still trigger corporate awareness. It was decided that not less than once a quarter next year we will have a slice of all our risks, answering the question what is the risk score on that risk as at today? The Risk Management Committee will drive that discussion with renewed focus at local department, directorate and Group level on how risks are overseen.

2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan	X	Public Health Plan		People Plan & Education Plan	
Quality Plan		Research and Development		Estates Plan	
Financial Plan		Digital Plan		Other *[specify in the paper]*	X

3. Previous consideration *[where has this paper been previously discussed?]*

RMC 11 February 2019 and CLE 26 February 2019

4. Recommendation(s)

Trust Board is asked to:

a.	**NOTE** the requirement for groups and Directorates to actively manage risks not reviewed within the past 12 months.
b.	**AGREE** that RMC should oversee and ensure risks with high severity are reviewed.

5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register		x	Risk Number(s):				
Board Assurance Framework			Risk Number(s):				
Equality Impact Assessment		Is this required?	Y		N	x	If 'Y' date completed	
Quality Impact Assessment		Is this required?	Y		N	x	If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to Trust Board: 7th March 2019

Monthly Risk Register Report

1.0   INTRODUCTION

1.1   This report provides the Trust Board with an update on risks monitored at Board level. The report outlines progress in improving the robustness of the Trust's risk management arrangements with a review of the Risk Register.

1.2   The Trust has identified a range of significant risks that are currently being mitigated, whose impact could have a direct bearing on the achievement of Trust Plans and priorities and requirements within the NHSI Accountability Framework or CQC registration, should the mitigation plans be ineffective.

1.3   A summary of the main controls and mitigating actions for the significant risks currently identified in each Clinical Group and Corporate Directorate is available in **Appendix A.**

2.0   RISKS REQUIRING BOARD ATTENTION

2.1   There remain 20 risks being monitored by the Board. Four are live and being monitored for any adverse impact and sixteen are being actively mitigated.

2.2   Risk owners and Executive leads need to review their risks to ensure that the 'Gaps in control and planned actions' are appropriate and will reduce the chance of the risk materialising.

2.3   Risk owners have updated the risks following review of current action progress and the risk re-evaluated for its severity or likelihood.

2.4   <ins>High severity / low likelihood risks</ins>

2.4.1   There continue to be 46 risks, across the Trust, which have a high severity; this is a decrease of one since last reported.

2.4.2   The majority of these (26) belong to Estates and New Hospital Project and as funding has been agreed to address some of these the number will reduce over the coming year.

2.4.3   The remaining 20 are a mixture of live risks with actions and some are being monitored. These risks were highlighted to CLE to ensure they have been reviewed in a timely manner and will be addressed at RMC in March 2019.

2.4.4   Of these remaining 20, an assessment will be made against each to see if further resources are required to reduce their severity.

2.7   Risks that have not been reviewed in the past 12 months

2.7.1   Twenty six risks have not been reviewed within the last 12 months. These are in the following Groups or Corporate Directorates.

Group/Directorate	Total
Corporate Operations	1
Estates & New Hospital Project	2
Medical Director Office	6
Medicine & Emergency Care	5
Primary Care, Community & Therapies	1
Surgery	10
Women & Child Health	1
TOTAL	**26**

2.7.2   Groups and Directorates are being provided with the detail of these so that they can review them and these will be discussed at RMC in March 2019.

3.0   WEB HOLDING INCIDENTS

3.1   There are a total of 595 incidents in web-holding waiting to be managed as at 25 February 2019, of which 176 are over 21 days, an increase on the number reported to Trust Board last month (156).

	Overdue as at 25/02/19	In Date as at 25/02/19
Corporate Nursing & Facilities	2	6
Corporate Operations	13	22
Estates & New Hospital Project	8	13
Finance	0	1
Imaging	16	30
Medical Director Office	31	34
Medicine & Emergency Care	44	185
Organisation Development	0	1
Pathology	11	24
Primary Care & Community Therapies	6	75
Strategy & Governance	0	0
Surgery	35	145
Women & Child Health	10	59
Total	**176**	**419**

3.2   Groups and Directorates have been asked to focus on clearing any incidents over 21 days, with immediate emphasis on those 5 weeks and older as this number has increased significantly.

4.0   RECOMMENDATIONS

Trust Board is asked to:

a) **NOTE** the requirement for groups and Directorates to actively manage risks not reviewed within the past 12 months.

b) **AGREE** that RMC should oversee and ensure risks with high severity are reviewed.

LEVEL OF RISK	
Green	Manage risk locally on Department / Team Risk Register
Yellow	Manage risk locally and add to Directorate Risk Register
Amber	Manage risk locally and add to Group Risk Register
Red	Manage risk locally; add to Group Risk Register; and submit to Risk Management Committee monthly

Allison Binns
Deputy Director of Governance
28 February 2019