Paper ref: TB (01/20) 006

Sandwell and West Birmingham Hospitals

Report Title	Monthly Risk Register Report				
Sponsoring Executive	Kam Dhami, Director of Governance				
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Meeting	Trust Board	Date 2 <sup>nd</sup> January 2020			

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

No new risks are being proposed for oversight by the Trust Board.

Risks with a current risk rating of red have been reviewed with respect to their mitigations and whether they are robust and timely. Two risks have had their actions agreed to be tolerated past the end of March 2020, all others have actions that will mitigate before then.

Groups and Directorates are assessing whether further resource could have a positive impact on reducing either the likelihood or severity of risk.

2. Alignment to 2020 Vision [indicate with an 'X' which Plan this paper supports]								
Safety Plan		Public Health Plan		People Plan & Education Plan				
Quality Plan		Research and Development		Estates Plan				
Financial Plan		Digital Plan		Other [specify in the paper]	Х			

**3. Previous consideration** [where has this paper been previously discussed?] Risk Management Committee, 9<sup>th</sup> December 2019, CLE, 17<sup>th</sup> December 2019

### 4. Recommendation(s)

The Trust Board is asked to:

**a. NOTE** the risks which have been assessed as being of high severity

**b. AGREE** to tolerate the two risks where actions will be completed past the end of 2019/20

c. NOTE the continued plan to address those risks with current red risk rating

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?		Υ		Ν	х	If 'Y' date completed	
Quality Impact Assessment	Is this required?		Y		Ν	х	If 'Y' date completed	

## SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

# **Report to the Trust Board: 2<sup>nd</sup> January 2020**

### **Monthly Risk Register Report**

### 1.0 INTRODUCTION

- **1.1** This report provides the Trust Board with an update on the risks it has oversight on, held within the Trust's risk register. 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 monitored by the Trust Board are available in **Appendices A<sub>1</sub> and A<sub>2</sub>**.

## 2.0 HIGH SEVERITY, LOW LIKELHOOD RISK

- **2.1** All risks which will have a high impact but low chance of happening, if realised, are detailed in **Appendix B.**
- **2.2** The risks in Appendix B are all live and defined as either being monitored (no further actions) or with actions. These are being presented to the Board for information.
- 2.3 There is recognition that reducing the impact these risks might have may not be possible but Groups and Directorates have been asked to review if anything else could be done with additional resources that may impact likelihood down to a rating of 1 and/or severity down to a rating of 3. The Risk Management Committee will oversee responses

## 3.0 RISKS WITH A CURRENT RED RISK RATING

- **3.1** Nine of the risks currently monitored by the Board, in this category, were reviewed last month to assess if the actions to reduce or mitigate the risks were adequate and/or robust and whether they would be delivered before 31 March 2020.
- **3.2** Equally, discussion centred on whether the risk, at its current rating, could be tolerated past the end of the year. The outcome of these discussions is as follows:
  - **Risk 1762 (Ophthalmic capacity issues with backlog)** trajectory for 50% reduction by July 2020. Directorate asked what resources are required to mitigate earlier.
  - **Risk 2784 (Midland Met contingency funding)** there is little that can be mitigated before Midland Met completion so it is proposed to **TOLERATE** this risk.

- **Risk 3689 (Contracting and payment)** there are further actions which can be taken to mitigate this with a view to reducing the risk rating. These actions are due to be delivered before the end of the financial year.
- **Risk 3696 (reduction in amenable mortality)** there has been movement with the actions and assurance was received that this risk will reduce before year end.
- **Risk 3696 (skills for EPR confidence)** reviewed and discussed at Digital MPA with assurance that actions on target and risk will reduce.
- **Risk 325 (Cyber-attack)** there are further actions which can be taken that will probably reduce this risk. The Board wish to retain oversight of this risk, which may remain as high and will be **TOLERATED** into 2020/21.
- **Risk 3212** (Ophthalmic diagnostics image storage) informatics have developed a plan which will mitigate the risk before the end of the financial year.
- **Risk 666 (lack of Tier 4 beds)** the Group Director of Nursing is reviewing whether there are any actions that may reduce this risk but it may need to be proposed to tolerate depending upon the outcome.
- **Risk 3588 (NNU consultant wellbeing)** plans are in place and actions are almost complete which will reduce this risk.
- **3.3** In addition to reviewing the risks currently rated red, Groups and Directorates have been asked to ensure that risks which had an initial red rating but had now been mitigated to amber are as robustly reviewed to assure themselves that the reduction in realisation or harm was real.

# 4.0 **RECOMMENDATIONS**

The Trust Board is asked to:

- a) NOTE the risks which have been assessed as being of high severity.
- **b) AGREE** to tolerate the two risks where actions will be completed past the end of 2019/20
- c) NOTE the continued plan to address those risks with current red risk rating.

Allison Binns Deputy Director of Governance

23<sup>rd</sup> December 2019