## RISKS WITH INITIAL RATING AS RED TO CURRENT RATING TO AMBER/YELLOW

Risk Number	Risk Description	Clinical group/ Corporate Directorate	Initial Rating	Current Rating	Date of mitigation (mm/yy)	Summary of additional control/details of review
3021	There is a risk that the procurement process for the replacement financier and contractor does not result in a compliant bid in 2019 because of insufficient market availability resulting in Midland Met delivery delay beyond 2022 and creating further unsustainable services	Estates and New Hospital project	5x4 = 20	3x4 = 12	10/18	National stakeholder meeting will oversee process in theory permitting rapid decision making process to take place. agreed approach confirmed with DHSC and HMT
2642	There is a risk that results not being seen and acknowledged by individual clinicians due to process and system issues will lead to patients having treatment delayed or omitted.	Medical Director's office	3x5 = 15	3x4 - 12	08/19	Additional controls in place to mitigate the risk from red to amber
3109	There is a risk that IT infrastructure service provision is inadequate Trust- wide, caused by the insufficient 24/7 workforce resilience, skills and change governance processes, which results in planned and unplanned changes being made to the IT infrastructure leading to loss of IT service provision to run clinical and non-clinical services safely and effectively	Informatics	4x5 = 20	2x4 = 8	03/19	There was a change freeze on IT infrastructure work which is now lifted but all changes go through approval processes. Change control process has been strengthened with operational leadership, clinical input and regular weekly meetings / decision making. Approval at Deputy COO and CIO level for all changes. Secure external expertise to mitigate immediate skills gap. Moderate to longer term: Consider partnership with industry specialist.

						Training and development of team to ensure technical and leadership skills are effective.
3110	There is a risk that the technical infrastructure, Trust-wide is not robust nor subject to compliance against formal technical architecture and is therefore suboptimal. Combined with areas of legacy technology currently without a full plan to update or replace, there is an impact of loss of IT provision to run clinical and non-clinical services safely and effectively.	Informatics	5x4 = 20	3x4 = 12	08/19	A network review and remediation plan. A technical architecture plan for systems to be produced to support the move away from legacy hardware risks. Comprehensive IT infrastructure programme with scope and milestones for delivery to be presented and signed off through digital board. KPI / dashboard to demonstrate trigger levels on critical infrastructure and early warning alert system needs development. PRTG continues to be updated a network report is now submitted monthly to Digital MPA and Digital committee.
121	There is a risk of financial deficit due to the unpredictable birth activity and the impact of cross charging from other providers against the AN / PN tariff.	Women and Child Health	4x4 = 16	3x4 = 12	08/19	Options for management of maternity pathways payment between primary and secondary provider for AN/PN care in progress by the Finance Director - with cross provider SLA planned. Risk proposed for removal from TRR when 2016-17 SLA is signed.