Report Title	Monthly Risk Register Report	
Sponsoring Executive	Kam Dhami, Director of Governance	
Report Author	Sindeep Chatha, Head of Patient Safety and Risk	
Meeting	Trust Board (Public)	Date 02 nd April 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.

One risk on the Trust Board has an overdue action.

7 risks have an upcoming action deadline of the 31/03/2020 and these are still awaiting completion although assurance was provided to RMC in March.

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

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

Risk Management Committee, 9th March 2020

4. Recommendation(s)

The Trust Board is asked to:

- **a. NOTE** the overdue and the upcoming actions of the red rated risks overseen by the Board
- **b. DISCUSS** any challenges to the completion of the actions

5. Impact [indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]				
Trust Risk Register	egister 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 the Trust Board: 2nd April 2020

Monthly Risk Register Report

1.0 INTRODUCTION

- 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.
- 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 A₁ and A₂**.

2.0 RISKS WITH A CURRENT RISK RATING OF RED

- **2.1** Currently there are 27 red risks with live actions on the risk register, 9 of which are monitored by the Trust Board.
- 4 red risks which are being monitored by RMC, are being reviewed.
 - Risk 3826 The identified Mental Health Cubicle in Majors (room 6) is currently
 not fully complaint with being ligature free RMC in March agreed this risk
 needed reframing because it is difficult to be ligature free, instead the terminology
 used should be ligature light in the room.
 - Risk 3827 Patients with mental health presenting at ED, only one cubicle
 identified as compliant for ligature free RMC in March agreed this risk needed
 reframing because it is difficult to be ligature free, instead it should read ligature
 light.
 - Risk 3842 patients who arrive in ED within a 6 hour window for thrombectomy will have a CTA RMC agreed this risk required further consideration because the actual risk is unclear; this is more in relation to a process
 - Risk 3836 Risk of DVT leading to PE in trauma patients treated with some immobilisation referred on from fracture clinic – this risk needed to be clearer that this related to patients seen in the ED.

3.0 RISKS OVERSEEN BY THE BOARD WITH OVERDUE/UPCOMING ACTIONS

3.1 Presently, one risk monitored by the Trust Board has an overdue action. This has been addressed and the risk owner has been reminded to provide an update on this.

Group / Directorate	Risk Number	Action	Number of actions due
Medical	2642	To review and update management of clinical	01/03/2020
Director's		diagnostic tests	
office			

- 3.2 A paper was presented to RMC in December challenging the robustness and the timeliness of the actions to mitigate the Trust Board monitored red rated risks. RMC was assured these actions were robust and on track for completion by the end of the financial year.
- 3.3 7 risks on the register have upcoming action deadline of the 31/03/2020. Details of the actions can be found in Appendix A_1 but the table below highlights which risks these correspond to. As of 25/03/2020 these actions are currently awaiting completion.

Group /	Risk	Risk Description	Number of
Directorate	Number		actions due
Finance	3689	There is a risk that the mechanism for contracting and payment in the NHS caused by a failure of national bodies to require adoption of capitation based contracting will result in the Trust not achieving its aim to be the best integrated care provider in the NHS by not allowing money to flow freely around local system.	3
Medical Director's Office	534	There is a risk of Trust non-compliance with some peer review standards and impact on effectiveness of tumour site MDTs due to withdrawal of UHB consultant oncologists, which may lead to lack of oncologist attendance at MDTs	1
Medical Director's Office	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.	3
Medical Director's Office	3693	SBAF 14 - There is a risk that the Trust is unable to reduce amenable mortality to the timescale set out in our plans because we do not identify interventions of sufficient heft to alter outcomes.	5
Strategy and Governance	3696	SBAF 17 - There is a risk that we do not automate our processes, standardise them safely and reduce errors and duplication because not all our staff develop and	3

Group / Directorate	Risk Number	Risk Description	Number of actions due
		retain the necessary skills and confidence to optimise our new electronic patient record (Unity).	
Strategy and Governance	325	There is a risk a breach of patient or staff confidentiality caused by cyber—attack could result in loss of data and/or serious disruption to the operational running of the Trust.	1
Women and Child Health	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.	1

4.0 RECOMMENDATIONS

Trust Board is asked to:

- **a) NOTE** the overdue and the upcoming actions of the red rated risks overseen by the Board
- **b) DISCUSS** any challenges to the completion of the actions.

Sindeep Chatha Head of Patient Safety and Risk

25th March 2020