

<b>Report Title</b>	Monthly Risk Register Report		
<b>Sponsoring Executive</b>	Kam Dhami, Director of Governance		
<b>Report Author</b>	Sindeep Chatha, Head of Patient Safety and Risk		
<b>Meeting</b>	Trust Board (Public)	<b>Date</b>	4 <sup>th</sup> June 2020

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

16 risks with mitigating actions are currently being overseen by the Board. 10 of those are rated as red risks.

The majority of risks owners and Executive Director leads (if different) have provided assurances of the robustness of the actions to mitigate their risks and based on these recommendations have been put forward for the Board to consider.

The following are of particular note:

- Two Informatics risks (3109 and 3110) have been mitigated to an extent that the likelihood ratings have been reduced.
- UHB Oncologists' participation in MDT has improved following the use of WebEx and mitigated the risk (534) to its target rating. The suggestion is that the risk is archived following discussion at the June Risk Management Committee (RMC).

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

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

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

Risk Management Committee, 18<sup>th</sup> May 2020

### 4. Recommendation(s)

The Trust Board is asked to:

- a. **DISCUSS** the recommendations proposed for each risk

### 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	x	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: 4<sup>th</sup> June 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 entries.

**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 RISK REGISTER REVIEW UPDATE

**2.1** 16 risks with actions are currently being overseen by the Board and these were discussed at the May Risk Management Committee with the responsible person providing reassurance these risks were on track to have mitigations delivered on time and would have the desired effect in reducing the risk.

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
2784	Director of System Transformation	MMUH Funding for compensation scheme	4x5 = 20	2x4 = 8	↔
<b>Update</b>	There has been no change since the last update. This risk is being reviewed on an annual basis.				
<b>Recommendation</b>	<b>This risk has been agreed to be tolerated</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3689	Chief Finance Officer	Trust not achieving best integrated care due to mechanism of contracting	4x4 = 16	2x4 = 8	↔
<b>Update</b>	Assurance received by the Risk owner. This risk is SBAF 10 and monitored through Trust Board and FIC.				
<b>Recommendation</b>	<b>This risk has been agreed to be tolerated</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
325	Chief Informatics Officer	Risk a breach of patient and staff confidentiality caused by cyber-attack	4x4 =16	2x4 = 8	↔
<b>Update</b>	This risk was due to be reviewed after the penetration test but in light of the COVID-19 pandemic, RMC decided the risk rating was to remain unchanged. There is a specific risk on cyber-attack which relates to the current Covid-19 times and it is suggested that the two risks are reviewed together for mitigations and management.				
<b>Recommendation</b>	<b>This risk to continue to be overseen by the Board</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3696	Chief Operating Officer	Optimisation of UNITY	4x4 =16	2x4 = 8	↔
<b>Update</b>	This risk is being reviewed weekly from a trend point of view. Although the desired standards have not been met, the variance is well understood and actions are in place to address these. RMC suggests archiving this risk, which is considered to be generalised, and instead create new specific risks for drug administration, nursing metric work etc which will require further controls and actions. Some of these specific risks may fit into existing risks on the register. RMC will monitor this.				
<b>Recommendation</b>	<b>This risk to be archived</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
2642	Medical Director	Radiology results are not being acknowledged by individual clinicians	3x5 =15	1x5 = 5	↔
<b>Update</b>	Currently there has been no traction to this risk. Since February 2020 the focus in managing this risk has been on data of performance and education/training for individuals where results are unendorsed. Currently there are two actions which have been reviewed with the risk owner and deemed appropriate to mitigate the risk. The deadline for these actions is for <b>August 2020</b> . Once these have been achieved the rating will be reduced to the target rating. These are on track of being achieved.				
<b>Recommendation</b>	<b>This risk remain for Board oversight</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3693	Medical Director	Trust is unable to reduce amenable mortality to the timescale set out in our plans	4x4 =20	3x4 = 12	↔
<b>Update</b>	Since the last update the MEO post and further 2 MEs have been appointed but there has been disruption in ME work due to Covid-19. Some MEs are undertaking more reviews than others in view of clinical demands on some of the acute medical team. In order to control this risk the current plan is to continue with initiatives from the LfD committee, sepsis and pneumonia workforce. Currently there are 5 actions which have been reviewed with the risk owner and are deemed appropriate to mitigate the risk. The deadline for these actions is <b>August 2020</b> . Once these have been achieved the rating will be reduced to the target rating. These are on track of being achieved.				
<b>Recommendation</b>	<b>This risk remain for Board oversight</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
1762	Chief Operating Officer	Backlog of appointments	5x3 =15	2x3 = 6	↔
<b>Update</b>	Since the last update the number of backlog patients has reduced to 13.5K from 18.5K which is ahead of its trajectory. However care needs to be taken around the impact of telephone / virtual reviews and also a reduction in capacity due to COVID-19 safety requirements. This may impact on achieving the actions by the deadline and as a result not achieving the target rating. This risk will be monitored on a monthly basis by RMC.				
<b>Recommendation</b>	<b>This risk to remain for Board oversight</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3212	Chief Operating Officer	Patient care compromise in the event that the standalone hard-drives fails on which high levels of ophthalmic ultrasound patient diagnostic data resides	3x5 =15	3x1 = 3	↔
<b>Update</b>	All actions are in date and on track to being achieved. This risk is being reviewed at the directorate digital committee.				
<b>Recommendation</b>	<b>This risk to remain for Board oversight.</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
666	Chief Operating Officer	Children-young people with mental health conditions being admitted to paediatrics due to lack of tier 4 beds	4x4 =16	4x4 = 16	↔
<b>Update</b>	This risk is currently for Board oversight for monitoring. Since the last update and in light of COVID-19, isolation requirements for CAMHs patients have been accommodated on Lyndon 1 with 1:1 support being provided to mitigate risk. Work is to continue to establish an ongoing collaboration with CAMHs providers in order to minimise the impact of delayed access to tier 4 beds. Until this is achieved the target rating will remain red.				
<b>Recommendation</b>	<b>This risk to remain for Board oversight</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3110	Chief Informatics Officer	Technical infrastructure Trust wide is not robust not subject to compliance against formal architecture and therefore suboptimal	3x4 =12	2x4 = 8	↓
<b>Update</b>	A process has been implemented to address the storage issues from 3 tiers and this is being monitored by the Digital MPA. Work also continues to further stabilise the infrastructure, this includes network switches being replaced and migration to new storage is on-going. Discussions with a cloud provider for a strategic solution for storage are also taking place. A new backup solution has been researched too. The				

	deadline to achieve this is <b>June 2022</b> . The likelihood of this risk can now be reduced.
<b>Recommendation</b>	<b>This risk to continue to be overseen by the Board</b>

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
121	Chief Informatics Officer	Financial Deficit due to unpredictable birth activity	4x3=12	4x2 = 8	↔
<b>Update</b>	The Chief Finance Officer has agreed a satisfactory position with all secondary provider partners to 2019/20 year end. The position for 2020/21 is currently being assessed but most likely to be similar to 2019/20. This risk will be reviewed again at June RMC.				
<b>Recommendation</b>	<b>This risk to remain for Board oversight</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3021	Chief Executive	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	4x3=12	4x2 = 8	↔
<b>Update</b>	The review date for this risk has been extended due to COVID-19. All actions are within the deadline.				
<b>Recommendation</b>	<b>This risk to remain for Board oversight</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3109	Chief Informatics Officer	IT infrastructure service is inadequate caused by insufficient 24/7 workforce resilience	2x4 =8	2x4 = 8	↓
<b>Update</b>	Currently there is one outstanding action in relation to recruitment of staff; a new Head of Infrastructure has been appointed to review the workforce in L3 and a new deadline of December 2020 has been proposed to meet this action. Nonetheless this risk has been deemed to have strong controls measures in place which has reduced the risk rating from its initial rating of 4x5=20 to the current and target rating of 8. RMC agreed this risk no longer needs oversight by the Board.				
<b>Recommendation</b>	<b>This risk for removal of Board oversight and to be monitored locally</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
214	Chief Operating Officer	Lack of assurance of the 18 week data quality pathway	2x3 =6	1x3 = 3	↔
<b>Update</b>	The SOP has been completed and there has been no increase in open referrals over 6 month period. This now needs to be checked with compliance with metrics but this is currently an outstanding action. The action was due to be completed by end of April 2020. This update will be received at June RMC.				
<b>Recommendation</b>	<b>This risk remain for Board oversight</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3160	Chief Operating Officer	Air conditioning will fail in computer rooms	4x2 =8	4x1 = 4	↔
<b>Update</b>	This risk is currently for Board oversight for monitoring since November 2019. No further incidents or concerns have been raised regarding this. All actions have been completed. A proposal for removal of this risk will be presented at June RMC.				
<b>Recommendation</b>	<b>This risk for removal for Board oversight to be agreed at June RMC</b>				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
534	Medical Director	Withdrawal of UHB oncologists which may need to lack of oncologist attendance at MDT	1x2=4	1x2 = 2	↓
<b>Update</b>	Since March 2020, oncologists have been remotely accessing the MDT meetings either via video conferencing and WebEx and this has mitigated the risk and reduced the current rating to its target rating. This has worked well and this is now a permanent solution. A proposal to archive this risk will be presented at June RMC.				
<b>Recommendation</b>	<b>This risk to be archived to be agreed at June RMC</b>				

Indicator	Key
↔	Current score remains unchanged
↓	Reduction in score since last update
↑	Increase in score since last update

### 3.0 RECOMMENDATIONS

Trust Board is asked to:

- a) **DISCUSS** the recommendations proposed for each risk.

Sindeep Chatha  
Head of Patient Safety and Risk

27<sup>th</sup> May 2020