Report Title	Monthly Risk Register Report	Monthly Risk Register Report				
<b>Sponsoring Executive</b>	Kathleen French, Chief Nurse					
Report Author	Sindeep Chatha, Head of Patient Safety and Risk					
Meeting	Trust Board (Public)	Date 1 <sup>st</sup> October 2020				

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

There are 13 risks overseen by the Board with upcoming action deadlines, of those 4 risks have been updated since the last meeting with recommendations put forward on how these could be managed moving forward.

The Board to note the following concerns have been discussed at RMC and CLE:

- There is no Trust-wide Covid 19 risks on the Trust Risk Register
- No clear process on how risks are being managed by the Organisation
- Ophthalmology backlog of outpatients' appointment is increasing to 22,000.

There continues to be incidents over 3 weeks old which are not managed within the agreed timeframes.

There is a slight improvement in the number of incidents in the 'saved for later'.

2. Alignment to	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 [specify in the paper]	Х		

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

Risk Management Committee, 14th September 2020, CLE, 22nd September 2020

4.	Recommendation(s)
The	e Trust Board is asked to:
a.	<b>NOTE</b> the update for each risk
b.	NOTE the concerns raised at RMC and CLE

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	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: 1st October 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.
- 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 **Appendix A.**

#### 2.0 NEW RISKS ADDED LAST MONTH

2.1 19 new risks have been added on to the Risk register by the Groups and are presented in Appendix B. These risks were reviewed by RMC but the committee understood these risks to be issues and incidents and it was difficult to ascertain what the risk was. This has highlighted some Trust-wide training needs on risk identification and statement writing.

# 3.0 GROUP COVID 19 RELATED RISKS

3.1 At June RMC the Groups presented their Covid 19 related risks specific to their areas. An update on each of these was presented at September's RMC. Since some of the services have resumed to some extent some of these risks have been mitigated and put forward for annual review. RMC did identify although the risk register has Group level risks; there is no Covid 19 Risk for Trust Board oversight. RMC is reviewing this and will propose a new risk to be added onto the Board Risk Register. This will be presented at October CLE and November Board for approval.

## 4.0 RISK REGISTER REVIEW

- 4.1 In August 2020 the Board agreed to extend the deadline for risk 214 (Lack of assurance of the 18 week data quality pathway). The new deadline is 28th February 2021.
- 4.2 In August 2020 the Board agreed to extend the deadline for risk 3212 (BMEC hard drives). The new deadline is December 2020.

- 4.3 In August 2020 the Board agreed to accept risk 4164 (Endorsements of results) to be added on the Trust Board risk register.
- 4.4 No further update to risk 2642 (Radiology Results), risk 3693 (reduce amenable mortality) and risk 3212 (standalone hard drives) is required since these risks are currently on track for achieving the target rating by the deadline.
- 5.0 Since the last Board meeting the following updates have been received and recommendations have been put forward for the Board to consider and discuss.

Indicator	Key
$\leftrightarrow$	Current score remains unchanged
$\downarrow$	Reduction in score since last update
1	Increase in score since last update

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
2784	Chief Executive	MMH Funding for compensation scheme	5x5=25	4x5 =20	$\longleftrightarrow$
Update	requires an update:  1: Conclude design v	validation of MEP (Tar	get date: 01/09/20	020)	
Recommendation	For information				

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=20	4x4 =20	$\longleftrightarrow$			
Update	at the end of Septer	The Board has agreed to tolerate this risk but there is one overdue action and two due at the end of September.  Since RMC, this risk has been updated and the current actions remain relevant and all actions are up to date and remain robust to manage this risk.						
Recommendation	For information							

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
325	Chief Informatics Officer	Cyber Attack	4x4=16	4x4 =16	$\longleftrightarrow$
Update	At RMC the risk owr actions will be achie	nutstanding actions and ner reassured the comn eved in October. A pape out windows 10 as well	nittee this risk is or er to DMPA is bein	n track and the ov g presented this	month

	October. This will reduce the risk of cyber-attack.
	1.
Recommendation	RMC will review this risk again in November once the actions have been completed.

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3110	Chief Informatics Officer	Technical Infrastructure	4x4=16	4x4 =16	$\longleftrightarrow$
Update	achieved in October  The current update new storage is in place cloud computer. Te	tstanding actions and to c. is that CB is working on ace, new backups are in elephony is being looked replaced. DC's and UPS	an Infrastructure place and IT has s d at as a result of t	strategy. In addit tarted the journe he City decomm,	ion a ey to
Recommendation	RMC will review thi	s risk again in Novemb	er once the action	s have been com	pleted.

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3109	Chief Operating Officer	IT Infrastructure	4x5=20	2x4 =8	$\longleftrightarrow$
Update	Servers are being m Veeam. The issue w the length of time it Additionally. New le relating to 4 other p	igrated to Vmware fror ith DPM is not so much would take to restore. ead for the team is in places. An advert has gor are successful the risk was so to be a successful the risk was got and the successful the risk was got are successful the risk was got are successful the risk was got and the risk was got are successful the risk was got and the	m Hyper-V and the what was or was i ace, however there ne out to attempt t	se will be backed not being backed e are still vacanci	up but
Recommendation	RMC will review th	is risk again in Novemb	er once the action	s have been com	npleted.

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
1762	Chief Operating Officer	Backlog of Outpatient appointment	5x3=15	2x3=6	$\longleftrightarrow$
Update		klog of outpatients' appure will be presented at 0		sing to 22,000. A	paper
Recommendation	RMC to review this	risk at October RMC			

#### 3.0 WEB HOLDING INCIDENTS

**3.1.** There were 130 incidents, which is a decrease compared to last month (172) waiting to be managed which have been in web holding for 21 days or more. RMC identified further work needs to be done to reduce these incidents. The Risk team is currently reviewing how incidents are being managed as well as offering training to Groups on how to manage the incidents; including timeframes for each investigation stage.

Group/Directorate	Feb 20	Mar 20	Apr 20	May 20	Jun 20	Jul 20	Aug 20
Corporate Operations	25	37	21	16	18	11	10
Corporate Nursing	1	1	6	1	2	4	3
Estates and New Hospital / System Transformation	1	12	8	2	7	2	0
Finance	2	0	2	2	2	1	2
Imaging	10	23	44	32	33	3	9
Medicine & Emergency care	19	37	70	48	50	78	63
Medical Directors Office			3	1	2	4	0
People & Organisation Development	3	0	3	5	6	7	14
Primary Care, Community & Therapies	0	4	27	7	2	4	3
Surgery	3	16	90	18	25	11	18
Women & Child Health	2	8	2	11	11	35	5
Strategy and Governance	0	3	1	1	3	1	0

#### 4.0 SAVED FOR LATER INCIDENTS

4.1 Currently there are 54 'saved for later' incidents; this is a significant decrease due to a number of the incidents being batch deleted pre April 2020. Weekly reminder emails continue to be sent to the reporter to either submit or request deletion of the incident.

## 4.0 RECOMMENDATIONS

Trust Board is asked to:

- a) NOTE the updates for each risk.
- b) NOTE the concerns raised at RMC and CLE

Sindeep Chatha Head of Patient Safety and Risk

24<sup>th</sup> September 2020