

Report Title	Monthly Risk Register Report		
Sponsoring Executive	Kathleen French, Chief Nurse		
Report Author	Sindeep Chatha, Head of Patient Safety and Risk		
Meeting	Trust Board (Public)	Date	3 rd December 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 1 risk has been updated since the last meeting.

The Board to note the following discussions at RMC and CLE:

- RMC have asked the Groups to put forward any red risks which may need to go on the Trust Board Risk Register for discussion at December's RMC.
- Number of Covid 19 risks in relation to mitigation and recovery plans are being reviewed by the responsible Executive lead. An update on these will be presented at December RMC and CLE.

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, 16th November 2020, CLE, 24th November 2020

4. Recommendation(s)

The Trust Board is asked to:

- a. **NOTE** the update 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: 3rd December 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 **Appendix A**.

2.0 COVID 19 RISKS

2.1 A number of Covid 19 mitigation and recovery risks are being reviewed by the Executive team in light of the current surge. Subsequently, assurance is being sought by the Executive Leads that these risks are being robustly managed. Update on these risks will be presented at RMC and CLE in December and thereafter at January Board.

3.0 RISK REGISTER REVIEW

2.1 There are 13 risks overseen by the Board, all outstanding actions have been updated and completed.

2.2 Risks 2784 (MMH Funding for compensation scheme) and 3698 (Trust not achieving best integrated care due to mechanism of contracting) continues to be tolerated but updates on outstanding and upcoming actions will be presented at December RMC.

2.3 Risks 1762 (ophthalmology backlog), 3212 (diagnostic images on PACS) and 325 (cyber-attack) have been reviewed but there has been no update or change to these risks since the last meeting.

2.4 No further assurance data has been received for Risk 534 therefore this risk will remain for Board oversight.

2.5 No further update to risk 2642 (Radiology Results), risk 3693 (reduce amenable mortality) and risk 3021 (MMH procurement) is required since these risks are currently on track for achieving the target rating by the deadline.

2.6 Since the last Trust Board the following actions have been updated.

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3109	Chief Operating Officer	IT infrastructure Risk	2x4=8	2x4 =8	↔
Update	<p>Action: Interview and appoint new members in to the L3 team (Target date: 08/10/2020).</p> <p>Update: Interviews have taken place and offers have been made. Once these have been accepted, this risk can be removed from Board oversight.</p>				
Recommendation	Risk to be reviewed again in December following accepting of offer and possible removal from Board oversight.				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
3110	Chief Operating Officer	Suboptimal IT technical structure in place	3x4=12	2x4 =8	↔
Update	<p>Action: Document a robust IT infrastructure plan with well-defined scope, delivery milestones and measurable outcomes signed off via digital committee (Target date: 15/10/2020)</p> <p>Update: The plan to migrate to the cloud and away from old infrastructure has been approved by the Digital MPA. Awarding of a contract for cloud hosting has been complete and the project to migrate is now being planned. Network remediation plan is underway.</p>				
Recommendation	Risk to be reviewed again in January 2021				

Risk ID	Executive Risk Lead	Title	Current rating	Target rating	Change
214	Chief Operating Officer	Lack of assurance of the 18 week data quality process	2x3=6	1x3 =3	↔
Update	<p>Action: Matrix dashboard to monitor compliance against the SOP (Target date: 30/04/2020)</p> <p>Update: The reporting related to meeting the SOP has been completed, but the planned care KPI SOPS does not currently support the 18 week data quality. The progress against the DQ assurance for RTT is now embedded in an internal audit program.</p>				
Recommendation	Risk to be reviewed again in January 2021				

5.0 RECOMMENDATIONS

Trust Board is asked to:

- **NOTE** the update in risks

Sindeep Chatha

Head of Patient Safety and Risk

26th November 2020