Trust Board Meeting

02 June 2016

Title of the paper:	Corporate Risk Register update report
Agenda item:	15/38
Lead Executive:	Helen Brown, Director of Strategy and Corporate Services
Author:	Jacqueline Smith, Head of Risk, Assurance and Compliance
Trust aims :	Double click on the box to mark as appropriate: ☒ To deliver the best quality care for our patients ☐ To be a great place to work and learn ☐ To improve our finances ☐ To develop a strategy for the future
Purpose:	The aim of this paper is to provide a summary update of the status of the corporate risk register and corporate risk profile of the organisation including the direction of travel for each risk score. Data for this report was extracted from Datix on 16 May 2016. There are 25 risks on the corporate risk register with a current score of 15 or more.
Link to Board Assurance Framework (BAF)	**PR1** Failure to provide safe, effective, high quality care (insufficiently robust and embedded quality governance and risk management)

Previously discussed:

Committee	Date
The corporate risk register is discussed at each Integrated Risk and Governance Committee (IRGC)	Last IRGC 3 May 2016 Next IRGC 31 May 2016

Benefits to patients and patient safety implications
Effective risk management frameworks and reporting provides a source of assurance that identified risks to patients are being identified, assessed and mitigated.

Recommendations

For information and assurance

West Hertfordshire Hospitals **NHS**

NHS Trust

Trust Board meeting – 02 June 2016

__Update Report: Corporate Risk Register__

Presented by: Helen Brown, Director of Strategy and Corporate Services

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1.   Purpose

1.1   The aim of this paper is to provide a summary update of the status of the corporate risk register and corporate risk profile of the organisation including the direction of travel for each risk score.

2.   Background

2.1   The corporate risk register is discussed in detail at the Integrated Risk & Governance Committee each month. The corporate risk register includes all risks scored at 15+ on the risk register.

2.2   The Integrated Risk and Governance Committee leads on the development and monitoring of integrated risk and governance arrangements across the Trust to ensure that the organisation delivers key priorities and manages risk efficiently.

2.3   The Integrated Risk & Governance Committee meets monthly to review the overall corporate risk profile and seek assurance that risks are being appropriately identified and managed.

3.   Analysis/Discussion

3.1   The risk register is a live document recorded on Datix and risk leads regularly review and update entries.   The Risk Review Group reviews all changes to risk scores for corporate risk entries including risks escalated to 15 or above and risks that are recommended for de-escalation due to effective mitigation or changes in circumstances.

3.2   Data for this report was extracted from Datix on 16 May 2016. As at this date 25 risks were recorded on the corporate risk register with a current score of 15 or more.

3.3   The chart below demonstrates the risk score movement on the corporate risk register from November 2015. From November 2015 to May 2016 there is an overall decrease of 6 risks on the corporate risk register.

Risk score movement > 15
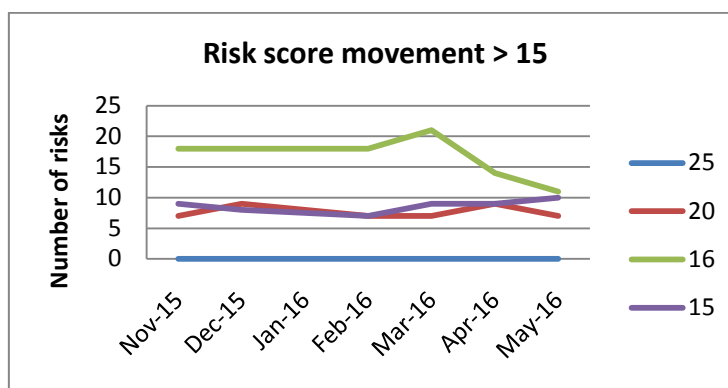
3.4 The table below provides a summary of risks on the corporate risk register indicating risk score travel for each risk.

ID	The Risk	Executive Risk Lead	Principal Risk: Primary	Initial risk score pre-mitigation	Current risk score
3 new and escalated risks					
3713	Gap in the statutory framework for DoLs (deprivation of liberties)	Chief Nurse and Director of IPC	PR1	16	16 (NEW)
3715	Endoscopy – air handling unit	Director of Environment	PR1	16	16 (NEW)
3723	Use of Knutsford as surge area	Director of Operations (Unsc Care)	PR3	16	16 (NEW)

ID	The Risk	Executive Risk Lead	Principal Risk: Primary	Initial risk score pre-mitigation	Current risk score
22 Risks agreed on Corporate Risk Register					
3689	Emergency care pathway / failure to meet emergency care standards	Medical Director	PR5	25	20
3458	Failure of the "Make IT Happen" ICT transformation programme to de-risk IT business continuity & realise key benefits	Chief Information Officer	PR4	20	20
3627	Outlying / surge patients causing increase to LOS & patient safety risk	Medical Director	PR5	16	20
3651	Outpatients capacity and the long waits in clinic for new patients and follow-up	Interim Chief Operating Officer	PR1	20	20
3120	Patient medical notes missing, delayed or poor condition.	Chief Information Officer	PR4	20	20
3422	Workforce engagement within the Trust	Director of HR and Organisational Development	PR2	20	20
3516	High usage of agency staff	Director of HR and Organisational Development	PR2	16	16
3538	Inadequate staffing for paediatric oncology service	Medical Director	PR1	16	16

ID	The Risk	Executive Risk Lead	Principal Risk: Primary	Initial risk score pre-mitigation	Current risk score
2883	Legionella management and control of water systems	Chief Nurse and Director of IPC	PR3	16	16
3501	Non-Compliance with HTM 00 - Provision of a Safe System of Work	Director of Environment	PR3	20	16
3144	Working environment - Occupational Health, Watford	Director of Environment	PR3	20	16
3480	A&E estates	Director of Strategy & Corporate Services	PR3	20	16
3227	A&E medical staffing	Director of HR and Organisational Development	PR2	20	16
3539	Clinical risk due to gaps in perinatal mental health pathway and model	Medical Director	PR1	15	15
2795	Control of asbestos containing materials (ACMs)	Director of Environment	PR3	15	15
3701	Inadequate provision of renal services	Medical Director	PR1	15	15
3249	Issues with typing and administration in cardiology	Interim Chief Operating Officer	PR5	15	15
3658	IT infrastructure-NBOCAP audit submission	Chief Information Officer	PR4	15	15
3375	Lack of structured inpatient diabetes service 24/7	Medical Director	PR1	12	15
3414	Loss of income resulting from the Trust failing to achieve requirements set out in the CQUIN schedule	Chief Financial Officer	PR7	20	15
3633	Only one consultant ward round occurring on Simpson ward per week and only GP cover out of hours	Medical Director	PR1	15	15
3631	Out of hours access to emergency theatres	Director of Operations (Elective Care)	PR1	12	15

3.4 Next steps:

- The finance team have reviewed all risks to delivery of this year's financial plan. These risks are formally being entered into Datix.
- It is agreed with Board that the Non-Executive Directors will carry out detailed assurance reviews of risks on the corporate risk register. These assurance reviews are underway. It is intended that this work will be complete by July 2016.
- To include deadline dates for achieving target risk scores for each risk on the corporate risk register.

4 Risks

4.1 The corporate risk register is an integral part of Trust risk management arrangements.

5 Recommendation

The Board is therefore asked to receive this report for information and assurance.

Helen Brown
Director of Strategy and Corporate Services
Date 24 May 2016