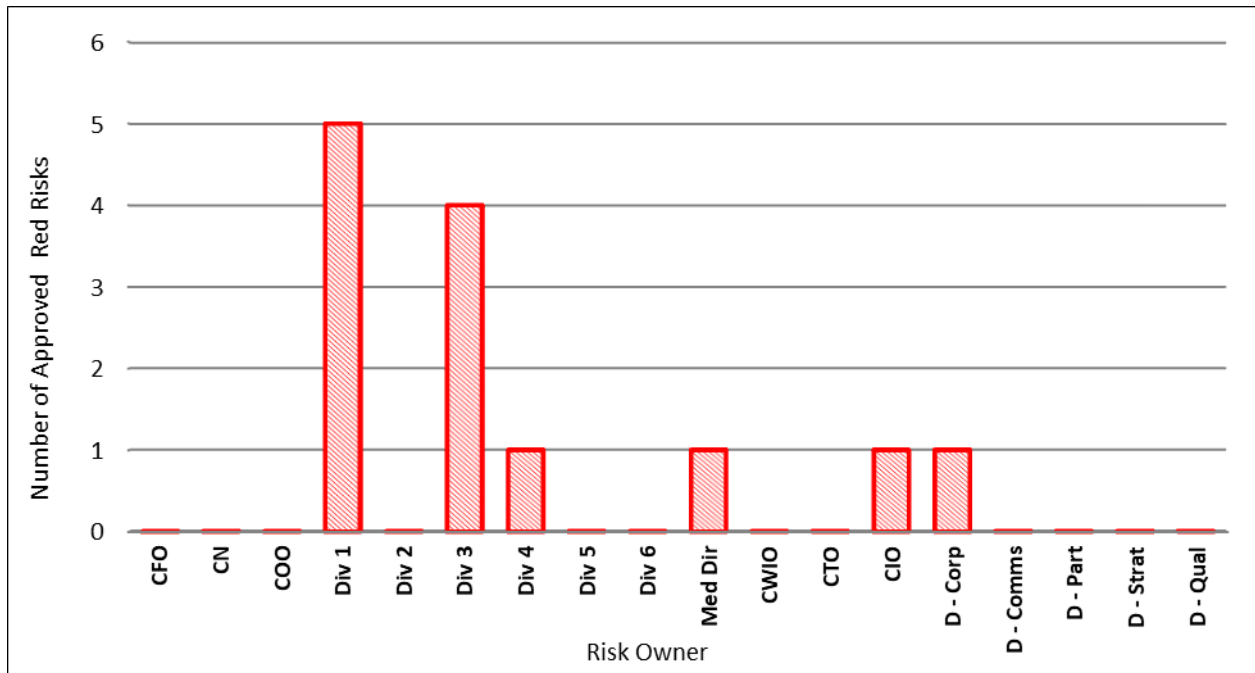


## Appendix B - Corporate Risk Register – October 2019

Assurance regarding the management of risks on the Corporate Risk Register is provided to the Board of Directors by a member of the Executive Team.

### 1. Current red risks held by each member of the Executive Team

The chart below shows the number of approved risks with a current score of 15 and above (red) held by the Clinical Divisions and each member of the Executive Team



### 2. Current red risks by grade

The table below shows the number and current score of the red risks held by the Executive Team.

Current Score 25	<ul style="list-style-type: none"> <li>• There are 0 risks with a current score of 25</li> </ul>
Current Score 20	<ul style="list-style-type: none"> <li>• There are 2 risks with a current score of 20</li> <li>• 1 of these risks is 4x5</li> <li>• 1 of these risks is 5x4</li> </ul>
Current Score 16	<ul style="list-style-type: none"> <li>• There are 6 risks with a current score of 16</li> <li>• All of these risks are 4x4</li> </ul>
Current Score 15	<ul style="list-style-type: none"> <li>• There are 5 risks with a current score of 15</li> <li>• All of these risks are 5x3</li> </ul>

### 3. Current red risk listing

#### Key to Risk Status

Risk is on track to meet target score in the agreed time frame.

Risk is on track but requires additional action to meet the target score in the agreed time frame.

Risk is off track and will not meet the target score in the agreed time frame.



The table below shows the detail of all red risks recorded for each Specialty in the Clinical Divisions for which the Chief Operating Officer provides assurance.

Division/ Specialty	Risk Title	Initial score (LxC)	Current score (LxC)	Target score (LxC)	First Approved as Red Risk	Risk Status
Division 1 Imaging	Reduced imaging capacity due to age profile of imaging equipment due to lack of investment - UHB. (3430)	15 (5x3)	15 (5x3)	4 (2x2)	Sep-17	Yellow
Division 1 Pharmacy	Failure to meet national targets/H+S standards due to insufficient storage for drugs at Sheldon Satellite Pharmacy - GHH. (3428)	15 (5x3)	15 (5x3)	4 (2x2)	Jul-17	Green
Division 1 Labs	Risk to patient safety due to delayed diagnostic laboratory results, specifically relating to the 4 hour standard target – QE. (2292)	16 (4x4)	16 (4x4)	4 (1x4)	Mar-19	Yellow
Division 1 Anaesthetics	Reduced capacity within Anaesthetics due to tax changes. (2855)	15 (5x3)	15 (5x3)	5 (5x1)	Jan-19	Yellow
Division 1 Theatres	Reduced capacity and activity due to Heritage theatres being at the end of life cycle - QE. (2856)	20 (4x5)	20 (4x5)	4 (2x2)	Jan-19	Yellow
Division 3 A&E	ED Overcrowding: Impact of extended stay in ED to patients and staff UHB. (3303)	15 (5x3)	16 (4x4)	9 (3x3)	Jan-14	Yellow

Division 3 A&E	Insufficient number and skill mix of junior and middle grade staff: Impact upon quality and safety of care - BHH, GHH. (3300)	12 (4x3)	20 (5x4)	3 (1x3)	Nov-17	
<p><b>Update on risk that is off track</b> – Percentage vacancy factor for ST4+ has gone from 61% in March 2015 to 82% currently. Inability to comply with RCEM and CQC recommendations to staff ED with Consultant level decision makers for 16hrs a day due to consultant vacancies. Two Datix submitted recently where BHH site was left with only CT3 level cover overnight due to inability to find locum cover and last minute sickness – this is in breach of RCEM national recommendations of 24/7 ST4+ cover.</p> <p>Actions underway include: ED to be included in International Fellows Programme, Joint ED recruitment and retention workshops (QE, HGS), Business case for recruitment being progressed.</p>						
Division 3 A&E	Failure to Provide Management/support for mental health patients in the Emergency Department - UHB. (3307)	16 (4x4)	15 (5x3)	4 (2x2)	Oct-18	
<p><b>Update on risk that is off track</b> – Controls in place including an escalation process to Mental Health trust and CCG.</p> <p>Actions required by external organisations. UHB is engaging with partners and enlisting the help of NHS Improvement to establish group for City-wide review of this risk</p>						
Division 3 Acute	AMU triage area: overcrowding leading to potential increase in mortality/morbidity – GHH. (3479)	16 (4x4)	16 (4x4)	4 (2x2)	Nov-17	
Division 4 Ophthalm	Long waiting time for ophthalmology outpatient follow up appointments which could lead to loss or deteriorating vision – QE. (3120)	20 (5x4)	16 (4x4)	4 (1x4)	Mar-19	
<p><b>Update on risk that is off track</b> - The Long waiting times for ophthalmology risk will not be resolved until the backlog of long waiting patients has significantly reduced. This requires additional estates and workforce capacity to meet the demand. An action plan has been presented to CEAG in September 2019 which contains the following:</p> <ol style="list-style-type: none"> <li>1 Streamline clinical pathways &amp; protocols</li> <li>2 Risk stratification &amp; partial booking</li> <li>3 Failsafe Processes</li> <li>4 Increase immediate capacity: Insourcing</li> <li>5 Increase medium term capacity</li> <li>6 Telemedicine</li> <li>7 Reconfiguration of services</li> </ol>						

The table below shows the detail of all red risks recorded for each member of the Executive Team in their corporate area of responsibility

CIO Education	Failure to meet public sector apprenticeship target and utilise total levy funding. (3196)	20 (5x4)	15 (5x3)	3 (1x3)	Dec-18	
DCA Info Gov	Non-compliance with GDPR and DPA 2018. (2671)	20 (5x4)	16 (4x4)	4 (2x2)	Nov-18	
MD ICT	Ability to provide a secure and stable ICT infrastructure that supports delivery of high quality care and business functions. (3113)	20 (4x5)	16 (4x4)	3 (1x3)	Jun-19	

**Approval and Assessment of Red Operational Risks**

The Risk Report provides assurance to the Board of Directors in regards to the management of red operational risks in the Trust. To ensure the quality and consistency of this assurance each red risk needs:

- Confirmation that the risk has been approved according to the Risk Management Policy; and
- Confirmation as to the status of the risk.

**Approving Red Risks**

Red risks can be approved by a Director (where the risk is owned by a department under their remit) or by a Divisional Management Team (where the risk is owned by a clinical specialty under their remit). The details of the approval (date and who approved the risk as red) must be recorded.

**Assessing the Status of Red Operational Risks**

There are 3 statuses for a Red Operational Risks when reported to the Board of Directors, they are:

<p><b>1. The risk is On Track to meet the Target Score within the agreed time frame.</b></p> <p>A risk may be assessed as On Track (green) where the actions listed can clearly and reasonably reconcile the Current Score of the risk to the Target Score.</p> <p>Each of the actions listed should have a reasonable prospect of being completed by the agreed Target Date. The appropriate Target Date for each action will be confirmed at the time that the risk is approved as a Red Risk.</p>	
<p><b>2. The risk is On Track but requires additional action to meet the Target Score within the agreed time frame.</b></p> <p>A risk may be assessed as On Track (amber) where the actions listed cannot clearly and reasonably reconcile the Current Score of the risk to the Target Score, but where actions can be amended or new actions can be introduced by the Risk Owner to address this.</p> <p>Each of the actions listed should have a reasonable prospect of being completed by the agreed Target Date.</p>	
<p><b>3. The risk is Off Track and will not meet the Target Score within the agreed time frame.</b></p> <p>A risk may be assessed as Off Track (red) where the actions listed cannot clearly and reasonably reconcile the Current Score of the risk to the Target Score, and where no other actions can be introduced by the Risk Owner to address this.</p>	

