To:	Trust Board
From:	Medical Director
Date:	June 2018

Title:	**Corporate Risk Report**

Responsible Director: Dr Neill Hepburn, Medical Director

Author: Paul White, Risk Manager

Purpose of the Report:

The purpose of this report is to provide the Trust Board with:

- Details of the current level of risk exposure as recorded in the draft corporate risk register
- An update on progress with implementation of the full refresh of corporate and operational risk registers throughout the Trust

The Report is provided to the Board for:

Decision		Discussion	
Assurance	✓	Information	

Summary/Key Points:

- The Corporate Risk register is in the process of being completely rebuilt in line with the new Risk Management Strategy; a copy of the draft Corporate Risk Register is attached to this report for the Trust Board's attention
- Based on this initial draft of the corporate risk register, the areas of greatest risk within the Trust at present are:
    - Management of emergency demand
    - Medical staff capacity & capability
    - Nursing staff capacity & capability
    - Fire safety
    - Water safety
    - Security management
    - Estates strategy & transformational change
    - Patient environment (estates & facilities)
    - Cost of reliance on a temporary workforce
    - Age profile of the workforce
    - Electrical safety
    - Mechanical infrastructure
    - Energy & sustainability
- Good progress has been made with reviewing and refreshing directorate risk registers to establish the use of standardised risk descriptions and provide a comprehensive view of risk exposure covering harm, service disruption, reputation and finances

Recommendations

That the Trust Board:

    1. Considers the content of the report and advises if any further action is required

Strategic Risk Register	Performance KPIs year to date
Corporate and operational risk registers will be aligned with the strategic risk register to enable the Trust Board to take assurance as to the management of risks at each of those perspectives.	Appropriate KPIs for risk management will be developed and incorporated within the revised Risk Management Policy, which is due to be submitted to the Audit Committee for approval in July 2018.

Assurance Implications

This report enables the Trust Board to review the effectiveness of corporate risk management in order to take assurance regarding the effectiveness of current risk mitigation plans and to consider the extent of risk exposure at this time.

Patient and Public Involvement (PPI) Implications

The effectiveness of the Trust's risk and corporate governance arrangements is reported through the Annual Governance Statement (AGS) and is included in the opinion of both internal and external audit. As such, it may influence the degree of confidence that patients and members of the public have in the Trust.

Equality Impact

The Trust's Risk Management Policy has been assessed for equality impact and no issues were identified.

Information exempt from Disclosure – No

Requirement for further review? No

1. Purpose of the Report

1.1   The purpose of this report is to provide the Trust Board with:

- Details of the current level of risk exposure as recorded in the draft corporate risk register
- An update on progress with implementation of the full refresh of corporate and operational risk registers throughout the Trust

2. Recommendations

2.1   That the Trust Board:

    1. Considers the content of the report and advises if any further action is required

3.	Reasons for Recommendations

3.1 It is essential the Trust Board maintains an awareness of the extent of risk exposure within the Trust and that the Board has confidence in the effectiveness of the Trust's risk management arrangements.

4.	Summary of Key Points

Corporate risk register

4.1 A corporate risk is defined as a risk that would have consequences for the objectives of more than one directorate, or for the whole Trust. All corporate risks have a Severity rating of 4 and are assigned to the lead executive as responsible manager and a senior operational manager as risk lead.

4.2 Wherever possible, corporate risks are also assigned to a lead management committee for regular review and oversight as well as upward reporting to the lead assurance committee.

4.3 The corporate risk register is still in development, being populated incrementally as each directorate completes a full review and replacement of its existing risk register. The risks referred to in this report represent the first phase of this process, which has involved transferring details from the old registers to the new and the creation of new risk register entries where none existed previously. This process is not yet complete and details of the current status are provided below.

4.4 The next phase will involve each risk lead reviewing the content of their new risk register and ensuring that they are fully up to date and reflective of the extent of risk exposure currently experienced by the Trust. As such, the content of the Corporate Risk Register at this stage should be considered as a draft and is presented to the committee in order to demonstrate the progress being made.

4.5 A copy of the draft Corporate Risk Register is attached as **Appendix I**.

4.6 Based on this initial review of corporate risks, the areas of greatest risk exposure (scoring 16+) within the Trust at present are:

Risk title	Current rating
Management of emergency demand	20 (Very high)
Medical staff capacity & capability	20 (Very high)
Nursing staff capacity & capability	20 (Very high)
Fire safety	20 (Very high)
Water safety	20 (Very high)
Security management	20 (Very high)
Estates strategy & transformational change	20 (Very high)
Patient environment (estates & facilities)	20 (Very high)
Cost of reliance on a temporary workforce	16 (Very high)
Age profile of the workforce	16 (Very high)
Electrical safety	16 (Very high)
Mechanical infrastructure	16 (Very high)
Energy & sustainability	16 (Very high)

Operational risk registers

4.7 An operational risk is defined as a risk that would have consequences for the objectives of services within a single directorate. All operational risks have a Severity rating of 3 and are assigned to the Clinical Director or Deputy / Associate Director as the manager responsible and a senior operational manager as risk lead.

4.8 The standard directorate operational risk register includes the following risks:

Risk title	Risk type (consequence)
Safety & effectiveness of patient care	Harm
Delayed patient diagnosis or treatment	Harm
Delayed patient discharge or transfer of care	Harm
Health, safety & security of staff, patients and visitors	Harm
Confidentiality & integrity of personal information	Reputation
Quality of patient experience	Reputation
Compliance with regulations & standards	Reputation
Workforce capacity & capability	Service disruption
Access to essential areas of the estate	Service disruption
Availability of essential equipment	Service disruption
Availability of essential information	Service disruption
Exceeding annual budget	Finances

4.9 The table below summarises progress with rebuilding directorate risk registers:

Directorate	Status	Due by	BRAG
Urgent Care Lincoln	Reviewed – Datix update required	End of June	G
General Medicine Lincoln	Reviewed – Datix update required	End of June	G
Cardiology	Reviewed – Datix update required	End of June	G
Haematology & Oncology	Reviewed – Datix update required	End of June	G
Pilgrim Medicine	Reviewed and Datix updated	Complete	B
Lincoln TACC	Reviewed and Datix updated	Complete	B
Lincoln Orthopaedics	Reviewed – Datix update required	Complete	B
Pilgrim Orthopaedics	Reviewed – Datix update required	Complete	B
General Surgery & Urology	Reviewed – Datix update required	Complete	B
Pilgrim Surgery	Reviewed – Datix update required	Complete	B
Head & Neck	Reviewed – Datix update required	Complete	B
Pilgrim Pain & TACC	Reviewed – Datix update required	Complete	B
Grantham Hospital	Reviewed and Datix updated	Complete	B
Women & Children	To be reviewed	End of August	R
Clinical Support Services – Diagnostics	Reviewed – Datix update required	End of June	G

Corporate Risk Report (June 2018)

Directorate	Status	Due by	BRAG
Clinical Support Services – Therapies & Rehab	Reviewed and Datix updated	Complete	B
Clinical Support Services – Pharmacy	Reviewed and Datix updated	Complete	B
Clinical Support Services – Outpatient Services	To be reviewed	End of August	R
Finance, Procurement & Corporate Affairs	Being reviewed	End of July	A
Human Resources & Organisational Development	Being reviewed	End of July	A
Estates & Facilities	To be reviewed	End of August	R
ICT & Information Governance	Reviewed – Datix update required	Complete	B
Clinical Governance (Medical Director)	Reviewed and Datix updated	Complete	B
Corporate Nursing	Reviewed and Datix updated	Complete	B
Communications	Being reviewed	End of July	A

Closed risks

4.10 The process of rebuilding all of the Trust's risk registers has involved closing down old entries and replacing them where necessary with new, standardised risk descriptions. Where risks have been replaced, the records have been linked in Datix to maintain an audit trail.

Reporting and assurance

4.11 Every risk on the corporate risk register is aligned with the most appropriate assurance committee of the Trust Board, to ensure that regular oversight and scrutiny or risk mitigation plans is maintained.

4.12 Executive management committees also receive regular reports on areas of the corporate and operational risk registers that fall within their remit. Further work is in progress to ensure that there is comprehensive coverage across all areas of risk within the Trust's governance arrangements.

4.13 Future reports to both management and assurance committees will provide analysis of the Trust's risk profile, highlighting common risk factors and areas of prolonged risk exposure as well as providing assurance where risks remain well managed.