

To:		Trust Board				
From:		Medical Director				
Date:		25 th May 2018				
Title:		Risk Management R	eport			
Responsible Director: Dr Neill Hepburn, Medical Director						
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Author	: Paul White	e, Risk Manager				
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The purpose of this report is to enable the Trust Board to:						
 Consider the level of risk exposure within the Trust at the present time (based on a draft Corporate Risk Register) 						
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The Report is provided to the Board for:						
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	Decision					
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Summary/Key Points:

- This report provides the Trust Board with an update on the development of the Corporate Risk Register, which is aligned with the strategic objectives of the Trust
- The highest risks recorded at present are in relation to: levels of emergency demand; delivery of the annual financial control total; staffing levels; staff engagement; and fire safety
- Standardised operational risk registers are being put into place for all clinical and corporate directorates
- The most common types of high operational risk are: clinical staffing levels; and the replacement of medical equipment
- Following a Board Development Session the BAF is currently being revised as agreed by Board members, and will be presented to the meeting of the Trust Board in June.

Recommendations

That the Trust Board:

- Considers the draft Corporate Risk Register and the plans that are in place to manage identified risks
- 2. Highlights any additional areas of risk that the Board would expect to see recorded on the Corporate Risk Register

Strategic Risk Register

The strategic risk register is currently being developed by the Trust Board.

Performance KPIs year to date

Appropriate KPIs for risk management will be incorporated within a revised Risk Management Policy (which is currently being consulted upon) and reported against once the Policy has been approved.

Assurance Implications

The new Risk Management Strategy (which is currently being consulted upon) describes the approach by which the assurance committees of the Trust Board will receive information on the management of corporate and operational risks to enable them to provide the Board with an appropriate level of assurance (based on available evidence).

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 enable the Trust Board to:
 - Consider the level of risk exposure within the Trust at the present time (based on a draft Corporate Risk Register)

2. Recommendations

- 2.1 That the Trust Board:
 - 1. Considers the draft Corporate Risk Register and the plans that are in place to manage identified risks
 - 2. Highlights any additional areas of risk that the Board would expect to see recorded on the Corporate Risk Register

3. Reasons for Recommendations

- 3.1 These recommendations are made to the Trust Board for the following reasons:
 - 1. Maintaining an awareness of the level of risk within the Trust is an essential part of the role of the Trust Board
 - 2. The Corporate Risk Register is still in development and the perspective of Board members is important in shaping it so that it is fit for purpose

4. Summary of Key Points

Corporate Risk Register

- 4.1 The Trust's corporate risk register details those risks which would impact on more than one directorate or Trust-wide (a Severity rating of 4 according to the Risk Scoring Guide.
- 4.2 Development of the Corporate Risk Register is still a work in progress, with the goal of ensuring that corporate risks covering the responsibilities of all directorates are recorded and assessed. At present not all risks within the Corporate Risk Register have been through a complete review cycle, therefore it should be considered as a draft document at this stage.
- 4.3 The highest recorded corporate risks against each of the Trust's strategic objectives are as follows:

Objective	Our patients: Providing consistently safe, responsive, high quality care		
Risk		Current rating	
Quality and safety of nursing care		12 (High)	
Effective safeguarding practice		12 (High)	
Safe medicines management		12 (High)	
Quality of the hospital environment		12 (High)	
Compliance with clinical governance regulations		12 (High)	
Compliance with information governance regulations		12 (High)	

Objective	Our services: Providing efficient, effective	e & financially sustainable		
	services			
Risk		Current rating		
Increased emergency demand & acuity		Very high (20)		
Significant unplanned expenditure		Very high (20)		
Delivery of financial efficiency savings		Very high (20)		
Compliance with fire safety enforcement notice		Very high (20)		
Major cyber security incident		High (12)		
Estates backlog maintenance		High (12)		
Health reco	rds management	High (12)		
Medical equ	uipment management	High (12)		

Objective	Our people: Providing services by staff who demonstrate our values and behaviours		
Risk		Current rating	
Medical staff vacancy levels		Very high (20)	
Nursing staff vacancy levels		Very high (20)	
Staff engagement & morale		Very high (20)	
Site & service specific cultural issues		Very high (20)	
Leadership capacity & capability		High (16)	
Staff training & appraisal rates		High (16)	

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

Operational Risk Registers

4.5 Standardised operational risk registers are being introduced for all clinical and corporate directorates, which include the following risks (with only clinical directorate registers containing patient care 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	
Workforce capacity & capability	Service disruption	
Availability of essential equipment	Service disruption	
Availability of essential information	Service disruption	
Access to essential areas of the estate	Service disruption	
Confidentiality & integrity of personal information	Reputation	
Quality of patient experience	Reputation	
Compliance with regulations & standards	Reputation	
Exceeding annual budget	Finances	

- 4.6 Any significant risks that emerge outside of the scope of this framework will be formally risk assessed with support from the Risk Manager before being added to the risk register.
- 4.7 Work on converting all existing directorate risk registers to this framework is progressing, with an expected completion date of the end of June. Once all directorate risk registers are in place it will be possible to analyse common themes and identify significant risk factors that may require action beyond the capability of a single directorate to manage.
- 4.8 At present the most frequently recorded areas of high operational risk throughout the Trust concern the following:
 - Recruitment & retention of clinical staff
 - Replacement of ageing medical equipment

Board Assurance Framework (BAF)

4.9 Following a Board Development Session the BAF is currently being revised as agreed by Board members, and will be presented to the meeting of the Trust Board in June.