



AGENDA ITEM

CTM MANAGEMENT BOARD

ORGANISATIONAL RISK REGISTER

Date of meeting	17/08/2021
FOI Status	Open
If closed please indicate reason	Not Applicable – Public Meeting
Prepared by	Cally Hamblyn, Assistant Director of Governance & Risk
Presented by	Georgina Galletly, Director of Corporate Governance
Approving Executive Sponsor	Director of Corporate Governance
Report purpose	FOR REVIEW & APPROVAL

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Service, Function and Executive Formal Review	July 2021	RISKS REVIEWED
Management Board	21 st July 2021	MANAGEMENT SIGN OFF OF RISKS RECEIVED
Quality & Safety Committee	9 th August 2021	ASSIGNED RISKS REVIEWED

ACRONYMS

CSGs	Clinical Service Groups
ILG's	Integrated Locality Groups

1. SITUATION/BACKGROUND

- 1.1 The purpose of this report is to present the high level organisational risks included on the Organisational Risk Register which have been assigned to the Committee, and highlight the management actions being taken to manage or mitigate these high level risks.
- 1.2 The report should be considered in the context that risks within the organisation are still undergoing a robust review and therefore the organisational risk register remains a work in progress and activity continues to ensure a consistency of approach to the quantification of risk across the Health Board.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.2 The following progress has been made since the last report:
- The ILGs are continuing to work to both rationalise and standardise the Clinical Service Group risk registers, the pace of this activity has been impacted by the operational pressures in response to Covid-19, however, activity has resumed with the target of October 2021 for all risks held on the Datix system to have been reviewed.
 - The monthly risk management awareness sessions held virtually via Teams are being well received. 207 members of staff have received the Risk Training Awareness Session - January to July 2021.
 - Risks on the organisational risk register have been updated as indicated in red.
 - Risk Management Milestones updated to align with the Targeted Intervention programme – see Appendix 2.

3 KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

3.1 NEW RISKS

Rhondda Taf Ely Locality

1. Datix ID 4203 – Unable to provide Surgical Services. Risk Rated as a 20.
2. Datix ID 1133 – Long Term Sustainability and Staffing of the Emergency Department at the Royal Glamorgan Hospital. Risk rated as a 16.
3. Datix ID 4620 – Access to Neath Port Talbot Hospital to deliver breast surgery (mainly cancer patients). Risk rated as a 15.

Bridgend Locality

4. Datix ID 4743 – Failure of appropriate security measures / safety fencing. Risk rated as a 20.

Corporate Governance

5. Datix ID 4699 - Failure to deliver a robust and sustainable Information Governance Function. Risk rated as a 16.

Facilities

6. Datix ID 4282 - Risks associated with the transfer to the new Planet FM System. Risk rated as a 16.
7. Datix ID 4693 – Electrocardiogram (ECG) Carts not connecting to Hospital Network. Risk rated as a 15.

Mental Health Services

8. Datix ID 3337 - Use of Welsh Community Care Information System (WCCIS) in Mental Health Services. Risk Rated as a 15.

There is an emerging risk being developed in relation to the emerging risk in relation to "A Safe and Fit for Purpose Inpatient Mental Health Estate" that is anticipated for escalated to the Organisational Risk Register.

Public Health

9. Datix ID 4741 – Failure to respond to Population Health Inequalities. Risk Rated as a 16.

Medicines Management & Pharmacy

10. Datix ID 3161– Lack of Wholesaler Dealers Authorisation. Risk Rated as a 15.
11. Datix ID 4590 – Critical Care Pharmacist Resource. Risk Rated as a 15.

3.2 CHANGES TO RISK RATING

a) Risks where the risk rating INCREASED during the period

Rhondda Taf Ely Locality

1. Datix ID 4292 – Long waiting times and large backlog for Cardiac Echo. Risk increased from a 16 to a 20 as a result of increased waiting lists due to the Covid-19 pandemic.

Bridgend Locality

2. Datix ID 4149 – Failure to sustain Child and Adolescent Mental Health Services. Risk increased from a 16 to a 20 as a result of the increased escalation status of Ty Llidiard.

b) Risks where the risk rating DECREASED during the period

No risks on the Organisational Risk Register were de-escalated this period.

3.3 CLOSED RISKS

Public Health

1. Datix ID 4105 - Potential Harm and poor experience for Patients as a result of the Health Board's focus and response to the Covid-19 Pandemic. Risk Closed as target score reached.

Merthyr & Cynon Locality

2. Datix ID 4235 – Cancer Performance – Gastroenterology Outcome of Covid-19. It is considered that this risk is captured within the overarching risk 4071 -"Failure to sustain services as currently configured to meet cancer targets". Therefore this risk has been closed this period to remove duplication.

Bridgend Locality

3. Datix ID 3584 –Neonatal Capacity / Stabilisation Cot at Princess of Wales Hospital. Risk Closed as Staffing is 3+1 so stabilisation cot is being funded and covered. CHANTs now operating 24/7 care.

3.4 Organisational Risk Register - Visual Heat Map by Datix Risk ID (Risks rated 15 and above):

Consequence	5			4253 3337 4620	4149 4080 3826 1793 4664		
	4				3742 4106 4157 4156 4458 4567 4148 4337 2987 4294 3958 3682 3008 4356 4500 816 4706 4282 4741 4743	4103 4152 4478 2018 4217 4476 4482 4116 3585 4684 4686 4685 3011 3654 3133 4360 3656 4281 4699 1133	4491 4060 4629 4477 4632 3562 4071 4688 4203 4292
	3					3899 3638 3072 4110 3698 3685 3161	4606 4218 4672 4671 4512 4693 4590
	2						
	1						
CxL	1	2	3	4		5	
Likelihood							

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	Aim to mitigate risks to patients and staff
Related Health and Care standard(s)	Governance, Leadership and Accountability
	All Health and Care Standards are included
Equality impact assessment completed	No (Include further detail below)
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Well-being Objectives	Provide high quality, evidence based, and accessible care.

5. RECOMMENDATION

5.1 The Committee are asked to:

- **Review** the risks escalated to the Organisational Risk Register at Appendix 1.
- **Consider** whether the Committee can seek assurance from the report that all that can be done is being done to mitigate the risks.
- **Note** the Risk Management Milestones update aligned with the Targeted Intervention programme – see Appendix 2.