The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

Meeting:	Board of Directors (Public)		
Meeting Date:	5 April 2022	**Agenda item:**	14
Report Title:	Report on Significant Risks contained within the Trust's Risk Register (All risks with a current score of 15 or more)		
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Implications

Link to key strategic objectives
[highlight which KKSO(s) this recommendation aims to support]

KSO 1	**KSO 2**	KSO 3	KSO 4	KSO 5	KSO 6
Safe and compassionate care	***Modernise hospital and estate***	*Staff engagement*	*Partnership working, clinical and financial sustainability*	*Healthy lives staff and patients*	*Investing in our staff*

Board assurance framework	KSO 1 KSO 2	
Significant risk register	All Significant Risks – Report attached	
	Y/N	If Yes state impact/ implications and mitigation
Quality	Y	Risks in relation to the quality of care that patients receive, as well as the quality of patient experience, are aligned to KSO 1
Legal and regulatory	Y	Risks in relation to potential legal and regulatory action faced by the Trust (particularly in relation to CQC enforcement notices) are aligned to KSO 1.
Financial	Y	Risks in relation to the financial costs of modernising the hospital's estate and digital infrastructure are aligned to KSO 2.

Assurance route

Previously considered by:	Assurance and Risk Executive Group (A&REG) People Committee Finance and Activity Committee Quality Committee

Executive summary

Action required: *[highlight **one** only]*	Approval	Information	Discussion	**Assurance**	Review
Purpose of the report:	This report is to provide the Board with assurance regarding the management of all risks classified as 'significant' (Risks scoring 15 and above) currently contained on the Trust's Significant Risk Register.				
Summary of Key issues:	Divisional Leadership Teams (DLTs) are responsible for reviewing moderate risks (those graded at 8-12). DLTs also review any Significant Risks relevant to their division prior to review at the Trust's Assurance & Risk Executive Group. All significant risks have nominated Executive leads who approve the risk review each month.				

	As of 22 March 2022, the Trust has 10 Significant Risks on the Trust Risk Register. These 10 Risks include the 2 Principal Risks aligned with KSO 1 and KSO 2. The Significant Risk grading breakdown is: • 3 risks scoring 20 (includes 1 Principal Risk) • 6 risks scoring 16 (includes 1 Principal Risk) • 1 risk scoring 15 Significant risks are aligned to the Trust's Key Strategic Objectives and Principal Risks as included in the Board Assurance Framework (BAF). A summary of the Key Strategic Objectives and alignment of existing Significant Risks is attached as **Appendix 1** (BAF summary sheet). Principal risks for each of the Key Strategic Objectives have been approved as part of the implementation of the BAF. A detailed report of all Risk Register entries scoring 15+ as of 22 March 2022 is attached as **Appendix 2**.
Recommendation:	The Board is invited to: • Note the contents of the report • Receive assurance relating to the management of existing Significant Risks
Acronyms	BAF – Board Assurance Framework DLT - Divisional Leadership Teams

REPORT

1. Introduction

Divisions review their Significant (15 and above) risks on a monthly basis and their Moderate (8-12) risks at least every three months as part of their Divisional Board meetings. The Assurance & Risk Executive Group (A&REG) receives a report from each Division detailing the review undertaken, and the current position for all of their risks. A separate report detailing all significant risks across the Trust is also received.

Significant risks are aligned to the Trust's Key Strategic Objectives as detailed in the new BAF for 2020 / 21. All Significant Risks are aligned to the six Key Strategic Objectives as shown below, along with responsible committees and lead Executive Directors. This alignment is shown in full in **Appendix 1**.

BAF ALIGNMENT	NUMBER
KSO1 QUALITY - Safe & Compassionate Care	5 (including principal risk)
KSO2 QUALITY - Estate & Infrastructure	5 (including principal risk)
KSO3 ENGAGEMENT – Staff Engagement & Culture	0
KSO4 ENGAGEMENT – Patient Pathways & Sustainability	0
KSO5 HEALTHY LIVES – Patient Outcomes	0
KSO6 HEALTHY LIVES – Maximising Staff Potential	0

2. Summary position Significant Risks

There are currently 10 Significant Risks on the Risk Register.

Current Significant Risk scoring profile:

Score	October Board Report	November Board Report	December Board Report	February Board Report	March Board Report	Current Position
20	2	2	2	2	3	3
16	8	7	6	6	6	6
15	1	2	1	1	1	1
Total	11	11	9	9	10	10

As of 22 March 2022, the Trust has 10 Significant Risks on the Trust Risk Register. This number remains consistent with the previous month. These 10 Risks include the 2 Principal Risks aligned with KSO 1 and KSO 2.

Risk ID 2592: *KSO 1: Sub-Optimal Care and Treatment* has been reviewed by the Medical Director in-month, with the updates shared at A&REG in March. It was noted that all Section 29A Warning conditions have been lifted by the CQC, and the Trust is currently on course for clearing the 104-week wait patient backlog. However, it was agreed that the current risk

grading of Major (4) x Likely (4) = 16 remains appropriate at present, as concerns remain surrounding several of the Significant risks aligned to KSO 1.
Risk ID 2989: *Potential reduction in NHS E/I funding allocation for the roof RAAC programme* has also been reviewed in-month. More narrative has been added to the risk in relation to the impact this reduction in funding would have on compliance issues, such as fire compartmentation and ventilation. It was agreed that the current risk grading of Catastrophic (5) x Likely (4) = 20 remains appropriate.

Risk ID 2915: *Risk of patient harm due to increased waiting times for elective surgery* was also discussed at A&REG in March. It was noted that the Trust's position for this risk had improved in-month, with DSU scheduled for returning to elective care on 21 March, as well as the previously noted improvement in the Trust's 104-week wait patient backlog. However, it was agreed that concerns remain in relation to the potential for harm amongst "P2" priority patients, and that additional narrative in relation to this position should be included in the risk narrative during the next risk review. The current grading remains at Major (4) x Likely (4) = 16.

Risk ID 2199: *Timely Access to Emergency Care including time spent in the Emergency Department* was also discussed at A&REG. It was noted that patient flow out of ED remains challenging, particularly in relation to the Trust being in Full Capacity Protocol. Whilst there are also concerns in relation to ambulance offload delays, it was noted that this has been articulated in a separate risk (Risk ID 2984: *Risk to patient safety during ambulance offload delays*), and therefore it has been requested that this risk be reviewed by the Medicine division during their next governance meeting, with a full update provided at the next meeting of A&REG. The current grading of risk ID 2984 is Catastrophic (5) x Unlikely (2) = 10.

A detailed report of all Risk Register entries as of 22 March 2022 currently scoring 15+ is attached as **Appendix 2.**

Whilst the Trust currently has 10 Significant Risks (including 2 Principal Risks), it is important that the Trust's Board be aware of the Top 3 Risks for the organisation. These have been highlighted in **Appendix 3.**

One of the Trust's Principal Risks for KSO 3 has also been downgraded in-month. This is **Risk ID 2791**: *Requirement for urgent and significant improvement in relation to staff attitudes and behaviours.* Following receipt of the very positive report from the Trust's CQC inspection in 2021/22, which stated that "significant improvements were noted throughout our inspection regarding culture and a focus on patient safety", it was proposed that the Likelihood of this risk be downgraded from Likely (4) to Possible (3). This proposal was sponsored by the Deputy CEO and the Director of People. Although the March meeting of A&REG was not quorate, it was agreed that this downgrade could be actioned by the Director of Patient Safety as a Chair's Action, with support from the Director of Finance. Therefore, it was agreed that the current grading of Risk ID 2791 can be reduced from Moderate (3) x Likely (4) = 12 to Moderate (3) x Possible (3) = 9. While this means that Risk ID 2791 remains a Moderate risk at present, it is also important that the Board is aware of the grading of all KSO Principal risks.

3. Significant Risks aligned to KSO1

There are currently 5 (including the Principal Risk) Significant Risks aligned to KSO 1 as follows:

RISK ID	SUMMARY DESCRIPTION	EXECUTIVE OVERSIGHT	INITIAL SCORE (CXL)	CURRENT SCORE (CXL)	TARGET SCORE (CXL)	COMMENTARY
2592	**KSO1 Principal risk** There is a risk that patients may receive sub-optimal care / treatment, with failures in: - Outcomes - Safety - Experience	Medical Director	Major (4) x Almost Certain (5) = **20**	Major (4) x Likely (4) = **16**	Major (4) x Rare (1) = **4**	Risk reviewed at A&REG in March 22. The updates from the Medical Director were noted and approved. It was agreed that the risk grading of 16 remains appropriate at present, but this will be closely monitored over the next few weeks with the improvements noted for elective recovery. Risk reviewed by Medical Director in March 22. Approval has been granted for a new role of UEC improvement manager. The Trust is currently on course for clearing the 104-week waits by April; the Elective Recovery programme is ongoing. Concerns remain in relation to Emergency Performance, but all 29A notices have been lifted by the CQC. Risk grading to remain at 16.
2643	There is a risk that patients are unable to access safe and effective diagnostic imaging at the trust to service level standards, which may affect their clinical care, due to insufficient staff in diagnostic imaging.	Medical Director	Major (4) x Likely (4) = **16**	Major (4) x Likely (4) = **16**	Moderate (3) x Rare (1) = **3**	Risk reviewed at A&REG in March 22. The updates from the Risk and Governance lead and Medical Director were noted and approved. While it was noted that the current risk grading remains 16, it was agreed that it may be possible to identify a trajectory for downgrading the risk with the improvements noted in-month. This query will be returned by the Risk and Governance lead for the April meeting.

						Risk reviewed by Medical Director in March 22. Vetting SOP has been approved, as well as internal professional standards and KPIs for reporting. New General Manager for CSS appointed, and new improvement manager to be recruited. Risk grading to remain the same. Risk reviewed by CSS governance manager in March 22. Risk grading remains appropriate at 16. Risk narrative and controls remain up to date. Will review in 1 months' time (discussed with Radiology Governance Manager)
2244	Lack of MH beds in the community leading to a potential 12 hour A&E breach	Chief Operating Officer	Moderate (3) x Likely (4) = **12**	Major (4) x Likely (4) = **16**	Moderate (3) x Unlikely (2) = **6**	Risk reviewed at A&REG in March 22. The updates to the controls from the COO were noted and approved. The Group will seek updates from the noted deep dive, to be fed back at the April A&REG meeting. No change to the risk grading at this time. Risk reviewed by COO in March 22. Controls modified to reflect latest position. No change to grading at present Risk reviewed on behalf of Medicine Head of Nursing 23 February 2022. No change of grading proposed at this time. Existing controls reviewed no changes required at this stage. In month there have been five Mental Health 12 hour breaches to date.

2915	There is a risk that patients will come to harm as a result of increased waiting times for elective surgery	Chief Operating Officer	Major (4) x Likely (4) = **16**	Major (4) x Likely (4) = **16**	Major (4) x Rare (1) = **4**	Risk reviewed at A&REG in March 22. It was noted that the Trust remains on-plan for removing the backlog of 104-week waits by the end of April. DSU is also on track for reverting to elective care by the end of March. Risk grading to remain at 16 at present. Risk reviewed by COO in March 22. Risk narrative updated to reflect latest elective position. Risk grading appropriate to remain at 16. Risk reviewed by Deputy COO in February 22. Concerns remain that DSU remains in use to treat non-elective patients, however, current risk grading of 16 remains appropriate.
2199	Timely Access to Emergency Care including Time Spent in the Emergency Department	Chief Operating Officer	Major (4) x Likely (4) = **16**	Moderate (3) x Almost Certain (5) = **15**	Moderate (3) x Possible (3) = **9**	Risk reviewed at A&REG in March 22. It was noted that patient flow out of ED remains challenging, and is contributing to the Trust being in Full Capacity Protocol. Risk grading to remain at 15 at present. Risk reviewed by COO in March 22. Risk narrative and controls updated to reflect latest position. Risk grading remains at 15 at present. Risk reviewed with Medicine DLT in March 22. Risk narrative and controls remain up to date; no change to the risk grading at this time.

4. Significant Risks aligned to KSO 2

There are currently 5 (including the Principal Risk) Significant Risks aligned to KSO 2 as follows:

RISK ID	SUMMARY DESCRIPTION	EXECUTIVE OVERSIGHT	INITIAL SCORE (CXL)	CURRENT SCORE (CXL)	TARGET SCORE (CXL)	Commentary
2757	**KSO 2 – Principal risk** There is a risk that patients may receive sub-optimal care/treatment, with failures associated with: • Estate • Digital Infrastructure • Medical equipment	Director of Finance	Major (4) x Almost Certain (5) **= 20**	Catastrophic (5) x Likely (4) **= 20**	Major (4) x Unlikely (2) **= 8**	Risk reviewed at A&REG in March 21. It was noted that significant estates project work is ongoing to improve the site, including the resurfacing of the main ambulance loading area. The new endoscopy unit remains on-track for completion in Spring 22. No change to the risk grading at present. Risk reviewed by Director of Finance in March 21. Risk narrative updated to reflect the CQC recommending the Trust is removed from the Recovery Support Programme. However, risk grading was agreed for remaining at 20 at present. Risk reviewed by the AD for E&F, status as follows: Work continues at pace on the new Endoscopy unit, which will enable the current endoscopy unit to be re-located - this will allow for the decant for main theatres to enable the failsafe work to commence. The main entrance road surface will be completely replaced week beginning 7th of March 2022, following this, the loading bay will be resurfaced.

392	There is a direct risk to life and safety of patients, visitors and staff due to the potential of catastrophic failure of the roof structure due to structural deficiencies.	Director of Finance	Catastrophic (5) x Almost Certain (5) **= 25**	Catastrophic (5) x Likely (4) **= 20**	Major (4) x Rare (1) **= 4**	Risk reviewed at A&REG meeting in March 22. The mitigation that the ramp failsafe has been completed was noted and approved. It was agreed that despite this, it was appropriate for the risk grading to remain at 20, given that significant concerns remain in relation to the impact the roof integrity could have on the hospital from an operational standpoint. Risk reviewed by Director of Finance in March 22. The update from the health and safety manager was noted; assurance was provided that the ramp failsafe has been completed. Risk grading to remain at 20. Risk reviewed by the AD for E&F, status as at 28.02.22. 54 Acrow props remain in place. 470 steel and timber failsafe's are now in place – this includes 150 failsafe's which have been installed in the main gym and 238 failsafes which have been installed across the ramp. The failsafe on the ramp has been completed, to provide a safe route in the event of an emergency. The second round of inspecting the condition of the P1 planks continues. This will now provide us with information around the current condition of the planks and whether there have been any changes since the year 1 survey. The initial tap test and deflection surveys of

						the outstanding ward areas has been taking place out of hours, in conjunction with the site ops team. This approach has slowed down, due to capacity issues. The overall survey progress is in the region of 90% complete - this will be confirmed by Castons following the end of the February data reconciliation. The RAAC wall plank survey is underway along-side the roof surveying - this is approximately 98% complete. Monthly returns continue to be submitted to NHS E/I for oversight and the programme board remains in place and meets monthly.
2989	There is a risk that the RAAC programme will be heavily delayed, resulting in a Significant risk to patient, staff, and visitor safety.	Director of Finance	Catastrophic (5) x Almost Certain (5) = 25	Catastrophic (5) x Likely (4) = 20	Catastrophic (5) x Unlikely (2) = 10	Risk reviewed at A&REG in March 22. Some minor amendments to the risk narrative were suggested, which have now been actioned. Risk grading agreed to remain at 20. Risk reviewed by Director of Finance in March 22. Risk narrative updated to give more detail in relation to the operational risk. No change to the grading at this time. Risk reviewed and remains scored at 20, with the current position being articulated and costed up by the Director of Strategic Estates Projects.

2849	Unavailability of digital clinical systems due to a cyber incident	Deputy CEO	Catastrophic (5) x Likely (4) = **20**	Major (4) x Likely (4) = **16**	Moderate (3) x Possible (3) = **9**	Risk reviewed at A&REG in March 22. The Group were assured that the current narrative in relation to the political situation in Ukraine had been captured within the risk description. No change to the risk grading at present. Risk reviewed by Deputy CEO in March 22. The latest update from the digital risk review meeting was noted and approved. It was agreed that the risk grading should remain at 16 at present. Risk reviewed during digital risk review meeting in March 22. It was also noted that there may be an increase in likelihood of a cyber incident due to the ongoing political climate in Ukraine. No change to risk grading at present
2853	Clinical or other personal confidential data is stolen as a result of a cyber incident	Deputy CEO	Major (4) x Likely (4) = **16**	Major (4) x Likely (4) = **16**	Moderate (3) x Possible (3) = **9**	Risk reviewed at A&REG in March 21. It was agreed that the current grading of 16 remains appropriate, particularly given the increased risk of malicious cyber activity due to the ongoing conflict within Ukraine. Risk reviewed by Deputy CEO in March 21. The update from the digital risk review meeting was noted and approved. The risk grading was agreed as remaining appropriate at 16. Risk reviewed during digital risk review meeting in February 22. Information will be sought from ICS partners to answer the query in relation to the local and

						national picture of cyber risk management. There is also a slightly increased likelihood of attack due to the ongoing political climate in Ukraine and Russia. Risk grading to remain the same.

5. Summary and further actions

This report, and the accompanying annex from the Risk Register, summarise all Significant Risks currently contained on the Risk Register (as of 22 March 2022). All risks have been reviewed by the relevant Executive Director during the last month, and will continue to be reviewed in line with the Trust's policy on Risk Management. The report and annex describe any changes which have been undertaken during the risk reviews and also details progress in mitigating risks towards target levels.

The Board is invited to:

- Note the contents of the report
- Receive assurance relating to the management of Significant Risks

APPENDIX ONE: BAF SUMMARY SHEET KEY STRATEGIC OBJECTIVE	PRINCIPAL RISK	LEAD EXEC	MONITORING COMMITTEE	ALIGNED SIGNIFICANT RISKS
1: QUALITY To consistently provide safe and compassionate care for our **patients** and their families	**2592 - Current Rating 4 x 4 = 16** There is a risk that patients may receive sub-optimal care / treatment, with failures associated with: • Outcomes • Safety • Experience	Chief Nurse & Medical Director	Quality Committee	2643 – Delays to accessing diagnostic imaging 2244 - Delays to accessing community mental health beds 2915 – Delays to accessing elective surgery 2199 - Delays to accessing treatment within ED
2: QUALITY To modernise our **hospital** (estate, digital infrastructure and medical equipment) to support the delivery of optimal care	**2757 – Current Rating 5 x 4 = 20** There is a risk that patients may receive sub-optimal care / treatment, with failures associated with: • Estate • Digital Infrastructure • Medical equipment	Director of Finance	Finance & Activity Committee	392 – Roof 2989 – Potential reduction in funding for the RAAC programme 2849 – Cyber-crime (loss of systems) 2853 – Cyber-crime (theft of data)
3: ENGAGEMENT To strengthen staff engagement to create an open culture with Trust at its centre	**2758 - Current Rating 3 x 3 = 9** There is a risk that Trust leaders may be unable to strengthen staff engagement and trust impacting on the development of an open culture at the Trust **2791 – Current Rating 3 x 3 = 9** There is a risk that the underlying organisational culture impacts on the improvements that are necessary to patient and staff experience which will prevent QEH moving forward at the required pace. Specifically, there is a requirement for urgent and significant improvement in relation to staff attitudes and behaviours	Deputy CEO	People Committee	No Significant Risks aligned
4: ENGAGEMENT To work with **patients** and **system partners** to improve patient pathways and ensure clinical and financial sustainability	**2759 - Current Rating 4 x 3 = 12** There is a risk that the Trust is unable to work effectively with patients and system partners to improve patient pathways. This could impact the Trust's ability to ensure clinical and financial sustainability.	Director of Strategy	Finance & Activity Committee	No Significant Risks aligned
5: HEALTHY LIVES To support our **patients** to improve health and clinical outcomes	**2760 - Current Rating 4 x 3 = 12** There is a risk that the Trust is unable to adequately support our patients to improve their health and clinical outcomes	Medical Director	Quality Committee	No Significant Risks aligned
6: HEALTHY LIVES To maximise opportunities for our **staff** to achieve their true potential so that we deliver outstanding care	**2761 - Current Rating 4 x 3 = 12** There is a risk that Trust leaders are unable to maximise opportunities for staff which could impact on the ability of staff to deliver outstanding care	Director of People	People Committee	No Significant Risks aligned