The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

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| **Meeting:** | Board of Directors (Public) | | |
| **Meeting Date:** | 7 December 2021 | **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) | | |
| **Author:** | Douglas Woodcock – Risk Manager | | |
| **Executive Sponsor:** | Louise Notley - Director of Patient Safety | | |

**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* |

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| **Board assurance framework** | KSO 1<br>KSO 2 | |
| **Significant risk register** | All Significant Risks – Report attached | |
| | Y/N | If Yes state impact/ implications and mitigation |
| **Quality** | Y | |
| **Legal and regulatory** | Y | |
| **Financial** | Y | |

**Assurance route**

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| **Previously considered by:** | Assurance and Risk Executive Group (A&REG)<br>People Committee<br>Finance and Activity Committee<br>Quality Committee |

**Executive summary**

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| **Action required:** *[highlight **one** only]* | Approval | Information | Discussion | **Assurance** | Review |

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| **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.<br><br>As of the Assurance & Risk Executive Group meeting on 16 November, the Trust has 9 Significant Risks on the Trust Risk Register. This is a reduction of 2 from the previous month. These 9 Risks include the 2 Principal Risks aligned with KSO 1 and KSO 2. |

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| | At the A&REG meeting on 16 November, two risks were downgraded to moderate and removed from the Significant Risk Register. The details of these risks have been included within the main body of this report.<br><br>The Significant Risk grading breakdown is:<br><br>• 2 risks scoring 20 (includes 1 Principal Risk)<br>• 6 risks scoring 16 (includes 1 Principal Risk)<br>• 1 risk scoring 15<br><br>Significant risks are aligned to the Trust's Key Strategic Objectives and Principal Risks as included in the Board Assurance Framework (BAF).<br><br>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.<br><br>A detailed report of all Risk Register entries scoring 15+ as of 16 November 2021 is attached as **Appendix 2**. |
| **Recommendation:** | The Board is invited to:<br><br>• Note the contents of the report<br>• Receive assurance relating to the management of existing Significant Risks |
| **Acronyms** | BAF – Board Assurance Framework<br>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** | 4 (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 9 Significant Risks on the Risk Register.

**Current Significant Risk scoring profile:**

| Score | July Board Report | August Board Report | September Board Report | October Board Report | November Board Report | Current Position |
|---|---|---|---|---|---|---|
| **20** | 2 | 2 | 2 | 2 | 2 | 2 |
| **16** | 6 | 7 | 7 | 8 | 7 | 6 |
| **15** | 0 | 0 | 0 | 1 | 2 | 1 |
| **Total** | 8 | 9 | 9 | 11 | 11 | 9 |

As of the Assurance & Risk Executive Group meeting on 16 November, the Trust has 9 Significant Risks on the Trust Risk Register. These 9 Risks include the 2 Principal Risks aligned with KSO 1 and KSO 2. At the A&REG meeting on 16 November, two risks were downgraded to moderate, and removed from the Significant Risk Register.

**Downgraded Risk:**

**Risk ID 2634:** *Timely Access to Cancer Care and Treatment* was downgraded to a moderate risk. The grading for this risk prior to the meeting was Major (4) x Likely (4) = 16. Following discussion, it was agreed patients are not coming to major harm as often as a likelihood grading of 4 would suggest; this is evidenced by only one Serious Incident having

been declared due to a patient sustaining significant harm due to longer waiting times for cancer treatment. The Group agreed it would be appropriate for the grading of this risk to be reduced to Major (4) x Possible (3) = 12, meaning it represented a moderate risk. However, as the backlog of patients waiting for cancer treatment remains, it was agreed that the risk would continue to be reviewed closely by the Operational Manager for Cancer, as well as the Deputy Chief Operating Officer.

**Risk ID 2937:** *Risk to data reporting within radiology due to RIS/PACS* was downgraded to a moderate. Prior to the meeting, this risk was graded at Moderate (3) x Almost Certain (5) = 15. Following discussion and assurance from the General Manager for Clinical Support Services, it was confirmed that the current situation did not indicate that patients were coming to moderate harm on a constant basis. For this reason, it was agreed that the likelihood of the risk would be downgraded to Likely (4), resulting in the risk having an overall grading of 12. The risk will continue to be reviewed by the Clinical Support Services DLT at the appropriate timely intervals, with any further issues escalated to the Group via the Deputy CEO where required

A detailed report of all Risk Register entries as of 16 November 2021 currently scoring 15+ is attached as **Appendix 2.**

Whilst the Trust currently has 9 Significant Risks (including 2 Principal Risks), it is important that the Trust's Senior Leadership Team be aware of the Top 3 Risks for the organisation. These have been highlighted in **Appendix 3.**

## 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**<br>There is a risk that patients may receive sub-optimal care / treatment, with failures in:<br>- Outcomes<br>- Safety<br>- 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 November 21. The amendments to controls in relation to staff Covid-19 vaccines were noted and approved. Risk grading to remain at 16.<br><br>Risk reviewed by Medical Director in November 21. Controls were amended to reflect latest position for staff Covid-19 vaccinations. No changes to the risk grading proposed at this time. |
| 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 November 21. It was agreed that the risk narrative and controls remain up to date. The risk grading remains appropriate at 16 at present.<br><br>Risk reviewed by Medical Director in November 21. Risk narrative and controls remain up to date. No changes to the risk grading were proposed.<br><br>Risk reviewed at the extraordinary Radiology governance meeting on 01/11/2021, risk remains the same. |
| 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 November 21. The latest updates from the Deputy Chief Nurse and COO were |

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| | | | | | | noted. It was agreed that the risk grading remains appropriate at 16.<br><br>Risk reviewed by COO in November 21. The update from the Deputy Chief Nurse was noted; clarity was sought in relation to the workstream currently reviewing MH patients which has now been provided (regional ICS workstream). No changes to the risk grading were proposed.<br><br>Risk reviewed by Deputy Chief Nurse in November 21. Risk cause, effect, and controls all amended to reflect latest position. No changes to the risk grading were proposed. |
| 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 November 21. There was some discussion in relation to the initial and current grading of the risk, as they are both currently at 16; this raises questions about the effectiveness of our mitigations. Risk current and initial grading to be reviewed at next risk review meeting in month.<br><br>Risk reviewed by COO in November 21. The updates from the Deputy COO were noted and controls further amended. Risk grading to remain the same.<br><br>Risk reviewed by Deputy COO in November 21. |

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| | | | | | | Controls amended to reflect latest position. No changes to the risk grading were proposed. |
| 2199 | Timely Access to Emergency Care including ambulance handover and 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 November 21. It was agreed that the current risk remains high, as ED continues to experience extremely high demand. No changes to the risk grading at this time.<br><br>Risk reviewed by COO in November 21. It was noted that there are plans in place to propose two new risks to capture the separate elements of this risk. These risk assessments will be reviewed by the COO prior to approval.<br><br>Risk reviewed by Risk Manager and ED Service manager in November 21. Following an action from A&REG in October 21, 2 new risk assessments have been drafted in relation to potential for patient harm whilst waiting for ambulance offloads, as well as patient harm whilst awaiting transfer out of department. These risk assessments will go to the chief nurse for review. If approved, the Risk Manager and Service Manager recommend downgrading and potentially closing Risk 2199 as all of the major aspects of the risk will be covered in the new risk assessments. |

4. **Risks previously aligned to KSO 1 downgraded to Moderate in November 21**

| RISK ID | SUMMARY DESCRIPTION | EXECUTIVE OVERSIGHT | INITIAL SCORE (CXL) | CURRENT SCORE (CXL) | TARGET SCORE (CXL) | Commentary |
|---|---|---|---|---|---|---|
| **2634** | Timely access to cancer care and treatment | Chief Operating Officer | Moderate (3) x Almost Certain (5) = **15** | Major (4) x Possible (3) = **12** | Minor (2) x Possible (3) = **6** | Risk reviewed at A&REG in November 21. Following robust discussion, it was agreed for the likelihood of the risk to be reduced, in line with the rationale provided by the surgical division. Risk to be re-graded to Major (4) x Possible (3) = 12, meaning it is now a moderate risk.<br><br>Risk reviewed by COO in November 21. The updates from the Deputy COO were noted, and further amendments to the risk cause were made to provide greater specifics. The request to downgrade the risk from the surgical division was noted. Decision to be taken to A&REG in November 21.<br><br>Risk reviewed by Deputy COO in November 21. The risk cause and control were amended to reflect the current position. The surgical division is also recommending this significant risk be downgraded, as only one patient has been identified as having suffered major harm within the last few months. Therefore, the likelihood of the risk should be downgraded. This recommendation will be taken to the COO for support in November before escalation to A&REG. |

## 5. Significant Risks aligned to KSO 2

There are currently 4 Significant Risks (including the Principal Risk) 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**<br>There is a risk that patients may receive sub-optimal care/treatment, with failures associated with:<br>• Estate<br>• Digital Infrastructure<br>• 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 November 21. Risk grading to remain at 20 as significant concerns remain in relation to the Trust's estate and digital infrastructure.<br><br>Risk reviewed by Director of Finance in November 21. The latest update from the Health and Safety manager was noted and approved. No changes to the risk grading were proposed.<br><br>Risk reviewed 01.11.21 by AD for E&F, Head of Estates, Head of Estates Projects and H&S Manager. The refurbishment of Churchill ward will be completed by the 22nd of December, and the 4 outpatient teams will move into this space over the Christmas period. No changes to the risk grading at this time. |
| 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 in November 21. The latest updates from the health and safety manager were noted and approved. It was agreed that the risk grading of 20 remained appropriate at |

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| | | | | | | present.<br><br>Risk reviewed by Director of Finance in November 21. The latest update from the Health and Safety Manager was noted; the Castons tap and test roof plank survey has been subject to data correction from Castons, hence the percentage of completion has been changed. No changes to the risk grading were proposed.<br><br>Risk reviewed by Health and Safety Manager in November 21. 58 Acrow props remain in place and are monitored weekly. 235 timber/steel failsafe's are now in place – this includes 150 failsafe's which have been installed in the main gym to support all of the roof RAAC planks, and 22 failsafes which have been installed in the new Medical Equipment Library/Mattress store (was the catering store). |
| 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 November 21. The group was assured that the Trust's new cybersecurity manager would now be reviewing the cyber significant risks on a monthly basis to ensure all controls and narrative remain up to date. No changes to the risk grading at this time. |

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| | | | | | | Risk reviewed by Deputy CEO in November 21. The updates from the Cybersecurity Manager were noted and approved. The risk grading remains appropriate at this time.<br><br>Risk reviewed by Cybersecurity Manager in November 21. Risk narrative and controls were amended to reflect latest position. No changes to the risk grading were proposed. |
| 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 November 21. The group was assured that the Trust's new cybersecurity manager would now be reviewing the cyber significant risks on a monthly basis to ensure all controls and narrative remain up to date. No changes to the risk grading at this time<br><br>Risk reviewed by Deputy CEO. The updates from the Cybersecurity manager were noted and approved. The risk grading remains appropriate at present.<br><br>Risk reviewed by Cybersecurity Manager. Controls updated to reflect latest position. No change to the risk score at present. |

## 6. Significant Risks previously aligned to KSO 2 downgraded to moderate in November 21

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|---|---|---|---|---|---|---|
| 2937 | Risk of data reporting within radiology due to RIS/PACS | Deputy CEO | Moderate (3) x Likely (4) = **12** | Moderate (3) x Likely (4) = **12** | Moderate (3) x Rare (1) = **3** | Risk reviewed at A&REG in November 21. Following assurance from the General manager for Clinical Support Services that there was little indication of patients coming to constant moderate harm as a result of delays to scans, it was agreed for the likelihood of this risk to be reduced from almost certain to likely, resulting in the risk being re-graded as a moderate risk<br><br>Risk reviewed by Deputy CEO in November 21. The latest update from the RIS project board was noted and approved; the proposal for the grading change will be taken to A&REG in November 21.<br><br>Risk reviewed at RIS project board 21 October 2021. Assurance was provided that the department is able to clinically prioritise patients. However, significant concerns remain in relation to the department's consistent inability to submit data. Because of this, the risk was regraded to Moderate (3) x Almost Certain (5) = 15. This grading will be reviewed by A&REG in November. |

## 7. 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 the A&REG meeting on 16th November 2021). 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:<br>BAF SUMMARY SHEET<br>KEY STRATEGIC OBJECTIVE | PRINCIPAL RISK | LEAD EXEC | MONITORING COMMITTEE | ALIGNED SIGNIFICANT RISKS |
|---|---|---|---|---|
| **1: QUALITY**<br>To consistently provide safe and compassionate care for our **patients** and their families | **2592 - Current Rating 4 x 4 = 16**<br>There is a risk that patients may receive sub-optimal care / treatment, with failures associated with:<br>• Outcomes<br>• Safety<br>• Experience | Chief Nurse<br>&<br>Medical Director | Quality Committee | 2643 – Delays to accessing diagnostic imaging<br>2244 - Delays to accessing community mental health beds<br>2915 – Delays to accessing elective surgery<br>2199 - Delays to accessing treatment within A&E |
| **2: QUALITY**<br>To modernise our **hospital** (estate, digital infrastructure and medical equipment) to support the delivery of optimal care | **2757 – Current Rating 5 x 4 = 20**<br>There is a risk that patients may receive sub-optimal care / treatment, with failures associated with:<br>• Estate<br>• Digital Infrastructure<br>• Medical equipment | Director of Finance | Finance & Activity Committee | 392 – Roof<br>2849 – Cyber-crime (loss of systems)<br>2853 – Cyber-crime (theft of data) |
| **3: ENGAGEMENT**<br>To strengthen staff engagement to create an open culture with Trust at its centre | **2758 - Current Rating 3 x 3 = 9**<br>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<br>**2791 – Current Rating 3 x 4 = 12**<br>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**<br>To work with **patients** and **system partners** to improve patient pathways and ensure clinical and financial sustainability | **2759 - Current Rating 4 x 3 = 12**<br>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**<br>To support our **patients** to improve health and clinical outcomes | **2760 - Current Rating 4 x 3 = 12**<br>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**<br>To maximise opportunities for our **staff** to achieve their true potential so that we deliver outstanding care | **2761 - Current Rating 4 x 3 = 12**<br>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 |