Agenda Item: 13

The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust

REPORT TO THE TRUST BOARD

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Carmel O'Brien, Director of Patient Safety	Decision	√	High	Med	Low
	Consideration		√		
	Information				
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
Leigh Hardy, Risk Consultant	Strategic		1	2	3
	Operational	√	*All – under development with new BAF*		
	Governance	√			
	IMPLICATIONS:		**RELATED WORK: (PREVIOUS PAPERS TO BOARD/COMMITTEE)**		
	Patient Care/Safety/ Experience	√			
	Finance	√	Board Assurance Committees Senior Leadership Team Trust Board 3 March		
	Workforce	√			
	Policy	√			
PEER ASSIST (inc. clinical engagement):	**PEER REVIEW:**				
Jamie Tear, Datix systems Administrator					
CQC Domain: (safe, caring, effective, responsive, well-led, use of resources)	All				

Meeting Date: 7th April 2020

Report Title: Report on Significant Risks contained within the Trust's Risk Register (All risks with a current score of 15 or more)

PURPOSE:

This report is intended to provide the Trust Board with assurance regarding the management of all risks classified as 'significant' (risks scoring 15 and above) currently contained on the Trust's Risk Register.

SUMMARY:

In accordance with the 2019-2022 Risk Strategy approved by the Board, this report contains information relating to the management of all risks classified as 'significant' (risks scoring 15 and above) on the Trust's Risk Register.

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 (A&REG). All significant risks also have nominated Executive leads who approve the risk review each month. There are currently (at 26th March 2020) **10** significant risks included on the Trust's Risk Register as follows:

- 2 risk scoring 20+
- 6 Risks scoring 16
- 2 Risks scoring 15

Significant risks are aligned to the Trust's strategic objectives and principal risks as included in the Board Assurance Framework (BAF). A new BAF for 20/21 is currently under development and

significant risks will be aligned to new strategic objectives once agreed. Alignment to current BAF strategic objectives is shown in section 1 of the report below.

Since the last report received by the Trust Board on 3rd March 2020 the following changes have been made to significant risks:

- 1 previously significant risk has been closed
- 1 new significant risk has been identified (Risk ID 2699 COVID-19) and this risk has been graded at 20

The significant risk profile is likely to increase in the next two months as new principal risks aligned to the new strategic objectives will need to be agreed and graded.

A detailed report of all Risk Register entries as at 26th March 2020 currently scoring 15+ is attached as an annex to this report.

Implications : Financial / Quality / Workforce / Policy:

Strategic / External	Operational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience	Workforce
√	√	√	√	√	√	√

RECOMMENDATION/S:

The Trust Board is invited to:

- Note the contents of the report
- Receive assurance relating to the management of existing significant risks

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 receives a report from each Division detailing the review undertaken and the current position for all significant and moderate and risks. The Assurance & Risk Executive Group also receives a separate report detailing all significant risks across the Trust.

Significant risks have been aligned to the Trust's strategic objectives as detailed in the BAF as shown below.

Strategic objective	Principal Risk	Aligned risks
1. To deliver care that is safe, effective and provides patients with the most positive experience possible	**2592 (current grade 16)** There is a risk that patients may receive sub-optimal care/treatment, with failures associated with: • Outcomes • Safety • Experience	2699 – COVID-19 392 – roof 2643 – diagnostic imaging 2199 – A&E performance 2634 – cancer waiting times 2679 – End of Life Care
2. To develop and sustain a well-led, effective, motivated and productive workforce	**2562 (current grade 12)** There is a risk that the Trust may be unable to establish and maintain an appropriate workforce to support the delivery of its objectives, with failures associated with: • Leadership • Engagement • Capacity • Capability	2640 – staff in transfusion service
3. Delivery of sustainable financial plans	**2561 (current grade 12)** There is a risk that the Trust becomes unsustainable financially and/or clinically, due to failure to: • Deliver financially • Deliver productively and efficiently • Transform services for the benefit of our patients	2343 – cyber crime

2. Summary position Significant Risks

There are currently 10 significant risks included on the Risk Register. Since the last report received by the Trust Board on 3rd March 2020 the following changes have been made to significant risks:

- 1 previously significant risk has been closed
- 1 new significant risk has been identified (Risk ID 2699 COVID-19) and this risk has been graded at 20

There are currently 10 significant risks on the Risk Register classified as follows:

Significant risks fall into the current categories:	
Risk type	**Number**
BAF risk 1 - Patient Safety and Quality	7
BAF risk 2 - People	1
BAF risk 3 - Financial and infrastructure	1
Corporate/Process risks*	1

*2483 reputational damage relating to regulatory notices from CQC

Current significant risk scoring profile:

Score	November Board report	December Board report	January Board report	February Board report	Current position
20	**2**	**0**	**1**	**1**	**2**
16	**9**	**8**	**7**	**7**	**6**
15	**7**	**6**	**4**	**2**	**2**
Total significant risks	**18**	**14**	**12**	**10**	**10**

The profile of significant risks indicates that although the number of significant risks remains the same this month, the overall level of significant risk has increased given that 2 significant risks are now graded at 20.

The significant risk profile is likely to increase in the next two months as new principal risks aligned to the new strategic objectives will need to be agreed and graded.

3. Significant risks

BAF Risk 1 – risk relating to the quality of care to our patients

Risk ID	Summary description	Executive Oversight	Previous Score (CxL)	Current Score (CxL)	Target Score (CxL)	Commentary
2699 NEW	There is a risk that a Covid-19 pandemic will result in the trust being overwhelmed with an increase in infectious patients experiencing acute respiratory symptoms and requiring admission and/or intensive care. There is also a risk that a significant proportion of staff will experience sickness or be required to self -isolate or commence social distancing and be away from work. This could result in the hospital being unable to safely and effectively manage or isolate infectious patients and deliver its normal services or standards of care.	Chief Nurse	Catastrophic (5) x Possible (3) **= 15**	Catastrophic (5) x Likley (4) **= 20**	Catastrophic (5) x Rare (1) **= 5**	The Trust has a Pandemic Plan and a Major Incident Plan in place, both of which have now been evoked with the COVID-19 pandemic being managed as a Major Incident. Leadership is being undertaken at Executive level with a Major Incident team in place and a control room base in the Chairman's office. A full and detailed Pandemic Plan has been activated with 9 identified workstreams. Daily sit-reps are being undertaken for Board members. A governance process around the management of the pandemic is also in place with action logs being completed in accordance with national and local directives. The Trust is participating fully in all relevant local and national reporting and escalation processes such as the Local Health Resilience partnership, teleconferences held by Government pandemic flu lead, regional meetings hosted by NHSE, gold/silver major incident command etc. A full communications plan is in place including staff briefings undertaken by

						Executives and a dedicated COVID-19 intranet site with the latest government and public health information included. Relevant equipment and PPE are in place in at the trust with 'fit' testing and training undertaken. Stocks of available equipment and consumables are in place and also checked. The Trust has taken action to identify and increase capacity in line with national directives. This includes reducing elective activity, undertaking Outpatient apptmts and follow up consultations via phone or video conferencing Suitable wards and areas have been identified to house and cohort COVID-19 patients. Although controls are strong this risk remains likely to occur. Given the fast moving situation this risk is being reviewed on a weekly basis and the Divisions are working on the development of their own risks relating to COVID-19.
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.	Chief Operating Officer	Catastrophic (5) x Likely (4) = **20**	Catastrophic (5) x Likely (4) = **20**	Major (4) x Rare (1) **= 4**	Risk to remain graded at 20 though bench marking of similarly graded roof risks with other best buy hospitals to be undertaken by the estates team. Existing controls section is also to be strengthened.

2592	**SO1 – 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 Likely (4) = **16**	Major (4) x Likely (4) = **16**	Major (4) x Rare (1) **= 4**	Risk remains graded at 16 as 6 other significant risks aligned to this principal risk. This risk may require re-assessment and re-grading given the developing situation relating to COVID-19
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**	Transformation plan to be developed following Radiology Quality summit in January. Risk remains as Radiologist and Radiographer staff challenges remain. However, now Radiology Service Manager now in place as of 16th March.
2634	There is a significant risk that patients will not receive timely cancer treatment in line with the 62 day referral to cancer waiting time standards.	Chief Operating Officer	Major (4) x Likely (4) = **16**	Major (4) x Likely (4) = **16**	Minor (2) x Possible (3) **= 6**	Risk relates primarily to two specialties (colorectal and urology). Both specialties have improved their position over the last month. Risk to be re-assessed following some activity transferring to N&N.
2679	There is a risk that patients reaching the end of their life do not have an Individualised Plan Of Care (IPOC). This is a 'must do' recommendation from the CQC	Chief Nurse	Major (4) x (Likely) 4 **= 16**	Major (4) x (Likely) 4 **= 16**	Moderate (3) x Possible (3) **= 9**	Risk to remain graded at 16 until new IPOC fully embedded
2199	There is a risk that patient care and treatment could be delayed in the A&E department due to a number of factors linked to capacity and demand. There is also an impact on patient experience in the department and the Trust's ability to achieve it's 4 hour waiting time target.	Chief Operating Officer	Moderate (3) x Almost Certain (5) = 15	Moderate (3) x Almost Certain (5) = 15	Moderate (3) x Possible (3) = 9	SDEC expansion in place and Increased capacity discharge lounge. Risk to remain graded at 16 until further improvement achieved.

BAF risk 2 – relating to our people

2640	Risk to the trust's ability to provide required capacity for transfusion services due to the depleted transfusion team staff.	Chief Nurse	Major (4) x Likely (4) = **16**	Major (4) x Likely (4) = **16**	Major (4) x Rare (1) **= 4**	Current mitigations in place have been reviewed. Risk to remain as service remains vulnerable. Additional capacity now identified to train transfusion staff. Training programme now being rolled out with trajectory in place.

BAF risk 3 – relating to finance and infrastructure

2343	Risk of disruption to the delivery of services, loss of confidential information, detrimental effect on the Trust's reputation, financial impact due to a cyber-crime attack.	Chief Operating Officer	Catastrophic (5) x Possible (3) **= 15**	Catastrophic (5) x Possible (3) **= 15**	Major (4) x Unlikely (2) **= 8**	National funding obtained to develop Cyber Security Assurance Dashboard. Funding also agreed for additional resource to implement 6 recommendations following cyber security audit presented to Board in December. Risk remains until work progressed.

Corporate/Process risks

2483	There is a risk of reputational damage to the trust if regulatory notices from the CQC (Section 31 and Section 29A notices) are not removed or acted on effectively.	Medical Director	Major (4) x Likely (4) **= 16**	Major (4) x Likely (4) **= 16**	Major (4) x Rare (1) **= 4**	24 of 46 conditions have now been signed off internally (at end February), though risk remains until CQC assessment

4. Previous significant risks

Risk	Summary Risk	Executive Oversight	Previous Score (CxL)	Current Score (CxL)	Target Score (CxL)	Commentary
2594	There is a significant risk of harm to patients and staff due to the age of the delivery beds within Central Delivery Suite, which are part of an aging bed fleet belonging to the Trust. There are 7 beds – manufactured by either Huntleigh of Hill-Rom which require replacement.	Chief Nurse	Major (4) x Likely (4) = **16**	**RISK CLOSED**	Minor (2) x Unlikely (2) = 4	Beds delivered and in use. Risk therefore closed 10/3/20

5. Summary and further actions

This report, and the accompanying annex from the Risk Register, describes all significant risks currently contained on the Risk Register. All risks have been reviewed at Divisional level, by a nominated Executive lead and also at the previous Assurance & Risk Executive Group meeting in March. The report and annex describe changes which have been undertaken during the risk reviews and also detail progress in mitigating risks towards target levels.

The profile of significant risks indicates that although the number of significant risks remains the same this month, the overall level of significant risk has increased given that 2 significant risks are now graded at 20. The significant risk profile is likely to increase in the next two months as new principal risks aligned to the new strategic objectives are agreed.