Agenda Item No. 16

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS (IN PUBLIC)

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	√			
	Governance	√			
	IMPLICATIONS:		**RELATED WORK: (PREVIOUS PAPERS TO BOARD/COMMITTEE)**		
	Patient Care/Safety/ Experience	√			
	Finance	√	Risk Committee Board Assurance Committees Senior Leadership Team		
	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: 4 February 2020

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

PURPOSE:

This report is intended to provide the Board with supporting narrative for 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 risks included on their Risk Registers graded between 8-12. DLTs also review any significant risks relevant to their division prior to review at the Trust's Risk Committee. All significant risks also have a nominated Executive lead who is approves the risk review each month. There are currently 12 significant risks included on the Trust's Risk Register as follows:

- 1 risk scoring 20+
- 7 Risks scoring 16
- 4 Risks scoring 15

Significant risks are aligned to the Trust's strategic objectives and principal risks as included in the Board Assurance Framework (BAF).

Strategic objective	Principal Risk	Aligned risks
1. To deliver care that is safe, effective and provides patients with the most positive experience possible	2592 - There is a risk that patients may receive sub-optimal care/treatment, with failures associated with: • Outcomes • Safety • Experience	392 – roof 2643 – diagnostic imaging 2199 – A&E performance 2634 – cancer waiting times 2594 – delivery suite beds 2684 – ECG machines NEW 2679 – End of Life Care ESCALATED
2. To develop and sustain a well-led, effective, motivated and productive workforce	2562 - 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 - 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	1938 – fire safety 2343 – cyber crime

Since the Board last reviewed significant risks during December the following changes have been made to significant risks:

- 8 previously significant risks have been reduced from 15 or above to below 15
- 2 significant risks have been increased from below 15 to above 15 (one of these is a new risk)

A detailed report of all Risk Register entries 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 Board is invited to:

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

1. Introduction

Divisions review all their Moderate (8-12) and Significant (15 and above) risks on a monthly basis as part of their Divisional Board meetings.

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

Significant risks are aligned to one of the three strategic objectives as detailed in the Board Assurance Framework. Each significant risk also has a lead Executive Director and identified 'monitoring committee' as set out below:

Strategic objective	Executive Leads	Monitoring Committee
1. To deliver care that is safe, effective and provides patients with the most positive experience possible	Medical Director Chief Nurse Chief Operating Officer	Quality Committee
2. To develop and sustain a well-led, effective, motivated and productive workforce	Chief Nurse Director of HR & OD	People Committee (PC)
3. Delivery of sustainable financial plans	Director of Finance & Resources	Finance & Activity Committee (F&AC)

2. Summary position Significant Risks

There are currently 12 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	8
BAF risk 2 - People	1
BAF risk 3 - Financial and infrastructure	2
Corporate/Process risks	1

Current significant risk scoring profile:

- 1 risk scoring 20+
- 7 Risks scoring 16
- 4 Risks scoring 15

One risk has increased in grading to significant and one new significant risk has been identified, as detailed in section 4 of the report below.

8 significant risks have been reduced as detailed in section 5 of the report below.

3. Existing Significant risks

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

Risk ID	Summary description	Executive Oversight	Current Score (CxL)	Target Score (CxL)
2592	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 Rare (1) = 4
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**	Major (4) x Rare (1) = 4
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**	Moderate (3) x Rare (1) = 3
2199	There is a risk that patients will have a poor experience in the Accident and Emergency Department due to the trust not meeting it's strategic objectives and not achieving the 4 hour waiting time target.	Chief Operating Officer	Moderate (3) x Almost Certain (5) = **15**	Moderate (3) x Possible (3) = 9
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**	Minor (2) x Possible (3) = 6
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**	Minor (2) x Unlikely (2) = 4
2684 NEW	There is a risk of misdiagnosis due to aging Echocardiography machines which were purchased over 10 years ago within the Cardio-Respiratory department	Medical Director	Moderate (3) x Almost Certain (5) = 15	Moderate (3) x Rare (1) = 3
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	Moderate (3) x Possible (3) = 9

***Risk 2634** – this risk has been rescored from Impact Catastrophic (5) x Possible (3) = 15 to Impact Major (4) x Likely (4) = 16 to reflect the actual risk of occurrence and impact.

3.2 BAF Risk 2 – relating to our People

Risk	Summary Risk	Executive Oversight	Current Score (CxL)	Target Score (CxL)
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 Rare (1) = 4

3.3 BAF Risk 3 - relating to Finance & infrastructure

Risk	Summary Risk	Executive Oversight	Current Score (CxL)	Target Score (CxL)
1938	There is a risk to life and infrastructure due to the high potential failure of multiple critical components of fire safety system due to historical building defects.	Chief Operating Officer	Catastrophic (5) x Possible (3) = **15**	Catastrophic (5) x Rare (1) = 5
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**	Major (4) x Unlikely (2) = 8

3.4 Corporate/Process risks

Risk	Summary Risk	Executive Oversight	Current Score (CxL)	Target Score (CxL)
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 Rare (1) = 4

4. Escalated Risks

There are 2 new risks or where the grade has increased so the risk is now classified as a significant risk. Further information relating to these risks is included on the attached Risk Register annex.

Risk	Summary Risk	Executive Oversight	Previous score (CxL)	Current Score (CxL)
2684 NEW BAF1	There is a risk of misdiagnosis due to aging Echocardiography machines which were purchased over 10 years ago within the Cardio-Respiratory department	Medical Director	N/A	Moderate (3) x Almost Certain (5) = 15
2679 BAF1	There is a risk that patients reaching the end of their life do not have an Individualised Plan Of Care (IPOC). Must do action from CQC	Chief Nurse	Moderate (3) x (Likely) 4 = 12	Major (4) x (Likely) 4 = 16

5. Reduced Risks

Since the last report 8 risks have been reduced following divisional and executive level reviews and are therefore no longer considered as significant risks. These risks will be managed at Divisional level unless the grade increases thereby resulting in re-classification as a significant risk

Risk	Description	Executive Oversight	Previous Risk Score	Current Score
2562 BAF2	There is a risk that the Trust may be unable to establish and maintain an appropriate workforce to support the delivery of its objectives. Continuation of the high vacancy levels, difficult recruitment market and low retention rates will lead to inconsistent and sub-optimal care to patients.	Chief Nurse	Major (4) x Likely (4) = **16**	Major (4) x Possible (3) = 12
2244 BAF1	There is a Lack of Actual and potential community inpatient mental health beds to enable patients requiring inpatient assessment and treatment to be transferred in a timely fashion leading to extended stay with an acute provider (including 12 hour A&E Breach - Actual and potential).	Chief Operating Officer	Major (4) x Likely (4) = **16**	Major (4) x Possible (3) = 12
2642 BAF1	The risk of medical inpatients coming to harm as a result of their placement within the hospital. (Medical Outliers).	Medical Director	Major (4) x Likely (4) = **16**	Major (4) x Possible (3) = 12
2553 Corp/ proces	There is a risk that the Trust's ineffective governance structures will lead to poor decision making and potentially poor patient care due to ineffectual identification of risk and oversight of recovery actions	Medical Director	Moderate (3) x Almost Certain (5) = **15**	Moderate (3) x Likely (4) = 12
2585 BAF1	All ED documentation is based on an electronic system, this includes all test results. The system remains slow and multiple logins are required for different systems. There is a risk that wrong information can be transcribed.	Chief Operating Officer	Moderate (3) x Almost Certain (5) = **15**	Moderate (3) x Likely (4) = 12
2514 BAF2	There is a risk that staff engagement does not improve which will impact the Trust's ability to deliver high quality care to our patients and achieve the outcomes set out in the Integrated Quality Improvement Plan.	Deputy Chief Executive	Major (4) x Likely (4) = **16**	Major (4) x Possible (3) = 12
2625 BAF1	Patients will not receive timely or appropriate treatment following pathology requests	Chief Nurse	Major (4) x Likely (4) = **16**	Major (4) x Possible (3) = 12
2583 BAF3	There is a risk that the Trust will not secure capital funding due to limited national capital, STP and Regional prioritisation to improve the layout of the ED which is not fit for purpose leading to continued delivery of sub-optimal care to patients.	Chief Operating Officer	Moderate (3) x Almost Certain (5) = **15**	Moderate (3) x Possible (3) = 9

6. Summary and further actions

This report, and the accompanying annex from the Risk Register, describes all significant risks currently contained on the Register and aligns them to the relevant BAF risk. All risks have been reviewed both at Divisional level and by a nominated Executive lead. 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 overall level of significant risk has reduced this month, the majority of significant risks are aligned to BAF risk 1 '*quality of services'*. This suggests that achievement of the Trust's Strategic Objective '*To deliver care that is safe, effective and provides patients with the most positive experience possible'* could be compromised. BAF risk 1 is therefore maintained at a score of 16 whilst BAF risks 2 and 3 have been reduced to 12 given the fewer number of risks aligned to them.

The Board are asked to note that further work is continuing to review the risk management process at divisional and corporate level so it is likely that the content and format of future reports may change. This is line with the further development of Trust strategy and associated changes to the BAF.