Agenda Item 19

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Dr Nick Lyons Medical Director	Decision		High	Med	Low
	Discussion	√	√		
	Information	√			
LEAD MANAGER:			**BAF REFERENCES & RAG:**		
Mr Mark Rose Deputy Director of Patient Safety	Strategic	√			
	Operational	√			
	Governance	√	**RELATED WORK: (PREVIOUS PAPERS TO COMMITTEE)**		
PEER ASSIST:	**PEER REVIEW:**				
Data prepared by Jamie Tear – Risk Management & Datix Coordinator					
CQC Domain: (safe, caring, effective, responsive, well-led)	All				

Meeting Date: 25 September 2018
Report Title: Risk Register 15+ and pending risks

PURPOSE:

The purpose of this paper is to update the committee on critical risks (those rated as 15+) along with the details of mitigations in place. Also to report on pending risks yet to be checked and confirmed.

SUMMARY:

The Governance team continues to work to embed and strengthen the oversight and management of risks at Divisional level.

- There are currently 23 open critical risks scoring 15+.
- Since the last report was run in August 2018 there has been 1 new high risk added and 1 removed due to a downgrading after review. Please see details of these for risks below for reference.

Estates & Facilities										
	Title	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18
2486	Generator fuel stored on site is non-compliant with the Oil Storage Regulations (2001)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	16
2453	Car Park Condition	n/a	n/a	n/a	n/a	n/a	16	16	16	12

FINANCIAL IMPLICATIONS / EFFICIENCY SAVINGS / QUALITY IMPROVEMENT:

RISK ASSESSMENT (CROSS-REFERENCE WITH RISK REGISTER WHERE APPROPRIATE):

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

RECOMMENDATIONS:

- Review progress since the last report
- Note actions and suggest further work

1.0 Introduction

The Risk and Governance team have completed reviews of all 15+ risks. The risk register now reflects the current position in relation to high and significant risks.

2.0 Risk Changes

Since the last meeting of the Committee the risks continue to be managed and mitigation and action to reduce likelihood is put in place. Table 1 shows where changes to scores have occurred since January 2018.

There has been 1 new risk added to the trust 15+ Risk register in the interim period:

Risk No 2486; details that the generator fuel stored on-site is non-compliant to the Oil storage regulations (2001) now requires disposal and replacement. The predicted write-off cost is likely to have a significant financial impact of approximately £90K and requires approval.

Risk No 2453; is no longer on the board risk register. This relates to the condition of the car-park, remedial work has since been completed and the risk is now lowered.

	Title	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18
CBU 1										
2306	Main theatres skill mix	15	15	15	15	15	15	15	15	15
2338	Treatment Room in Day Surgery Temperature Control	9	16	16	16	16	16	16	16	16
2387	Discharge from Critical Care delayed more than 4 hours resulting in emsa Breach and delayed admission	16	16	16	16	16	16	16	16	16
CBU 2										
2257	Consistency of protected Ring-fenced Trauma beds on Gayton	12	12	15	15	15	15	15	15	15
CBU 3										
No Open Risks 15+										
CBU 4										

2337	Scans are performed but not recorded on PACS so not visible to other Providers leading to possible adverse care.	20	20	16	16	16	16	16	16	16
2371	Vulnerable patients acquiring HAI with unusual organisms due to Non Compliance of Neonatal Unit Ventilation with HTM03-01	15	15	15	15	15	15	15	15	15
2197	Lack of Effective Leadership and Clinical Direction within O&G Department impacting on delivery & long term strategy	12	12	12	12	12	12	16	16	16
CBU 6										
No Open Risks 15+										
CBU 7										
2199	Failure to achieve 4 hour standard target	16	16	16	16	16	16	16	16	16
2321	Paediatric staffing in Emergency Department	9	9	9	9	15	15	15	15	15
CBU 8										
2316	Delivery of the 62 day cancer target	12	12	12	12	12	15	15	15	15
2311	MHRA inspection / report	9	9	9	9	9	16	16	16	16
2312	PACS (radiology) implementation	8	8	8	8	8	16	16	16	16
Estates & Facilities										
392	Roof Integrity and building infrastructure	16	16	15	15	15	15	15	15	15
1938	Fire Compartmentation & Fire Detection	15	15	15	15	15	15	15	15	15
2486	Generator fuel stored on site is non-compliant with the Oil Storage Regulations (2001)	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	16
Finance										
2428	Failure to achieve Trust Control Total	n/a	15	15	15	15	15	15	15	15
2430	Capital loan financing 2018-19	n/a	15	15	15	15	15	15	15	15
IM&T										
2343	The threat of the Trust's day to day operations being compromised by Cyber Crime	16	16	16	16	16	16	16	16	16
Corporate - Nursing										

1025	Challenges to achieve sufficient registered nurse recruitment & retention (previously ref. 0210)	16	16	16	16	16	16	16	16	16
2412	No central oversight and governance structure for medical device training compliance.	n/a	n/a	n/a	n/a	n/a	15	15	15	15
Trust Wide										
956	Failure to meet 18 week pathway and loss of income.	16	16	20	20	20	20	20	20	20
2483	CQC Section 31 and Section 29A Risk of regulatory notice in Maternity and Obstetrics services	n/a	n/a	n/a	n/a	n/a	n/a	16	16	16

3.0 Pending risks (item 6b on agenda)

There are currently 26 pending risks, (as at 14/09/2018) that are awaiting review and sign off (Attached as appendix 2).

	Total
Finance	7
IM&T	5
Trust Wide	2
CBU 3	2
CBU 2	2
Estates & Facilities	1
COO	1
CBU 1	1
Patient Experience	1
CBU 5	1
Corporate Nursing	1
Human Resources	1
CBU 4	1
Total	26