

Trust Board – 22 December 2020

Organisational Risk Register

The Organisational Risk Register (ORR) contains strategic risks that may prevent us from achieving our objectives. It is presented as part of a continuing risk review process.

Purpose of the report

This report provides assurance that risk is being managed effectively

Analysis of the issue

Overall, there are 32 risks on the ORR.

Assurance Framework

Assurance ratings on the ORR are discussed at the monthly review meetings. A number of ratings have improved this month due to the following;

- Identification of additional internal sources of assurance.
- The CQC Transitional Regulatory Approach. Feedback from ongoing focus groups and intelligence provided to the CQC is providing a strengthened source of external assurance.
- As detailed within the QAC and FPC Committee's mid-year review, assurance is being strengthened by QAC and FPC Chair/NED observation at the feeder level 2 committees (timings subject to covid governance arrangements). There will also be a peer review with our Buddy Trust, with the Chair of QAC and the Chair of FPC observing the NHFT equivalent Committee's and vice versa.

November 2020 Committee Review

The following key changes were reported to the Quality Assurance Committee (QAC) and the Finance and Performance Committee (FPC) in November 2020;

De-escalations

Risk 12 Service users, carers and families do not have a positive experience of care, do not feel able to participate effectively and share their experiences.

The de-escalation of risk 12 was approved by the Quality Assurance Committee in November 2020 and was de-escalated to the Directorate Risk Register risk number 4636 for on-going management and oversight by the Head of Patient Experience and Involvement.

Additions

Risk 52 Without sufficient student placement capacity, the health and social care system will have a shortfall in the availability of a qualified workforce.

The addition of this risk was approved by QAC in November 2020.

Changes in scoring

Risk 6 The step up to great mental health strategy does not deliver improved mental health services that meet quality, safety and contractual requirements and are sustainable.

The current score reduced from 16 to 12 as reported to FPC in November 2020. The score remains at 12 in December 2020.

Risk 16 The Leicester/Leicestershire / Rutland system is unable to deliver the agreed plan for Integrated Care Systems.

The current score reduced from 12 to 9 as reported to FPC in November 2020. The score remains at 9 in December 2020.

December 2020 review

Closures

Risk 46 We are unable to restore or recover our services, impacting on our ability to deliver against national requirements and commissioned activity.

The majority of services have been fully restored, with only a few not operating at full capacity. Residual performance and waiting time issues are captured in risks 44 and 28.

The Trust Board is asked to approve this closure.

De-escalations

Risk 50 The Long Term Plan/Ageing Well Urgent Community Response national targets may not be met, leading to a delay in the timely assessment of patients and reputational impact.

All actions have been completed and there are no remaining gaps in control or assurance. The current score aligns to appetite. The phase 3 funding regime is in place for month 7-12 of 20/21.

The Trust Board is asked to approve this de-escalation.

Changes

The following risk has a change in current score;

Risk 23 Failure to deliver the EPR system and demonstrate the benefits of the system

The current risk score has decreased to 4, in line with the residual and target scores. The review of the transition to the single EPR is being concluded and a plan is being determined for formal evaluation. This risk will be reviewed with a view to closure in January 2021.

Analysis

There are 14 risks with a high current score. Of these, the highest at 20 are the two latest risks regarding flu vaccination and student placement capacity.

There are currently seven covid-specific risks (after the closure of Risk 46). Risk 40 remains the overarching covid related risk 'The ability of the Trust to deliver high quality care may be affected during a Coronavirus COVID-19 pandemic'. This has been updated to reflect the current position (as at December 2020).

Summary list of risks and scores December 2020

No.	Title	SU2G	Initial risk	Current risk	Residual Risk	Target (Appetite)
1	The Trust's clinical systems and processes may not consistently deliver harm free care.	High Standards	16	16	8	8
2	The Trust's safeguarding systems do not fully safeguard patients and support frontline staff and services.	High Standards	12	12	8	8
3	The Trust does not learn from incidents and events and does not effectively share that learning across the whole organisation.	High Standards	15	12	8	8
4	Services are unable to meet safe staffing requirements	High Standards	12	12	8	8
5	Capacity and capability to deliver regulator standards	High Standards	12	12	8	8
6	The step up to great mental health strategy does not deliver improved mental health services that meet quality, safety and contractual	Transformation	16	12	12	8

	requirements and are sustainable.					
8	The transformation plan does not deliver improved outcomes for people with LD and/or autism.	Transformation	16	16	12	12
9	Inability to maintain the level of cleanliness required within the Hygiene Standards	Environment	12	8	8	8
10	Failure to implement planned and reactive maintenance of the estate leading to an unacceptable environment for patients to be treated in	Environment	16	16	12	12
11	The current estate configuration does not allow for the delivery of high quality healthcare	Environment	20	16	12	12
16	The Leicester/Leicestershire / Rutland system is unable to work together to deliver an ICS	Well Governed	16	9	6	3
20	Performance management framework is not fit for purpose	Well Governed	20	8	4	4
23	Failure to deliver the EPR system and demonstrate the benefits of the system	Single Patient Record	16	4	4	4
24	Failure to deliver workforce equality, diversity and inclusion	Equality, Leadership, Culture	12	12	9	9
25	Staff do not fully engage and embrace the Trusts culture and collective leadership	Equality, Leadership and Culture	16	8	8	4
26	Insufficient staffing levels to meet capacity and demand and provide quality services	Equality, Leadership and Culture	16	16	12	12
27	The health and well-being of our staff is not maintained and improved	Equality, Leadership and Culture	9	9	6	6
28	Delayed access to assessment and treatment impacts on patient safety and outcomes	Access to Services	16	16	12	12
33	Insufficient executive capacity (including Shared Chief Executive role) to cover demand and impacts on LPT ability to achieve its strategic aims	Well Governed	16	12	8	8
35	The quality and availability of data reporting is not sufficiently mature to inform quality decision making	Well Governed	16	12	12	12
40	The ability of the Trust to deliver high quality care may be affected during a Coronavirus COVID-19 pandemic	High Standards	20	15	10	10
41	The Trust may not appropriately manage the health and well-being of our BAME staff, and staff with key protected characteristics given	High Standards, Equality, Leadership and Culture	15	15	10	10

	the disproportionate impact of COVID-19					
42	The Trust may not appropriately manage its patients with LD and Autism given the known disproportionate adverse impact of COVID-19 on this patient group	High Standards	12	12	8	8
43	The Trust response to COVID-19 may negatively impact on the safety and well-being of vulnerable patients detained under the Mental Health Act.	High Standards	15	15	10	10
44	A post COVID-19 surge in referrals would have a detrimental impact on waiting times and patient harm if the Trust is unable to increase capacity	Access to Services, High Standards	16	16	12	12
45	A post COVID-19 surge in legal challenge would have a detrimental impact on our reputation and financial position.	Well Governed	9	9	6	6
46	<i>We are unable to restore or recover our services, impacting on our ability to deliver against national requirements and commissioned activity.</i>	<i>Well Governed</i>	<i>16</i>	<i>12</i>	<i>12</i>	<i>12</i>
47	We are unable to provide a COVID-19 safe environment for our staff and patients	Well Governed, High Standards	15	15	10	10
48	We are unable to contain expenditure, or to recover income in line with the limits imposed by NHSEI under the COVID financial regime.	Well Governed	15	15	10	10
50	<i>The Long Term Plan/Ageing Well Urgent Community Response national targets may not be met, leading to a delay in the timely assessment of patients and reputational impact.</i>	<i>Transformation</i>	<i>16</i>	<i>6</i>	<i>6</i>	<i>6</i>
51	If staff are not vaccinated for flu they pose a risk to the health and wellbeing of themselves, colleagues, patients and the wider community. This would adversely impact on Public Health, potentially leading to increased hospitalisation, increased staff sickness levels and a risk to those who are vulnerable and shielding.	Well Governed, High Standards	20	20	10	10
52	Without sufficient student placement capacity, the health and social care system will have a shortfall in the availability of a	High Standards, Equality, Leadership and Culture	20	20	15	10

Summary trend of risk scores for all risks (rolling year) as at December 2020

ORR	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20
1	16 ↔	16 ↔	12 ↓	16 ↑	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
2	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
3	15 ↔	15 ↔	12 ↓	16 ↑	16 ↔	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔
4	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
5	12 ↔	12 ↔	12 ↔	12 ↔	16 ↑	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔
6	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔
7												
8	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
9	16 ↑	16 ↔	12 ↓	12 ↔	16 ↑	16 ↔	16 ↔	16 ↔	12 ↓	8 ↓	8 ↔	8 ↔
10	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
11	12 ↓	12 ↔	12 ↔	16 ↑	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
12	12 ↔	12 ↔	12 ↔	9 ↓	9 ↔	9 ↔	9 ↔	9 ↔	6 ↓	6 ↔		
13	12 ↔	12 ↔										
14	12 ↔	12 ↔										
15	15 ↔	15 ↔										
16	16 ↔	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	9 ↓	9 ↔
17	16 ↔											
18	12 ↔	12 ↔										
19	12 ↔	12 ↔										
20	20 ↔	20 ↔	16 ↓	8 ↓	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔
21												
22	16 ↔	16 ↔	16 ↔	12 ↓	16 ↑	12 ↓	12 ↔					
23	16 ↔	16 ↔	8 ↓	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	4 ↓
24	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
25	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	8 ↓	8 ↔	8 ↔	8 ↔
26	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
27	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔
28	16 ↔	16 ↔	20 ↑	20 ↔	20 ↔	20 ↔	20 ↔	16 ↓	16 ↔	16 ↔	16 ↔	16 ↔
29	20 ↔	12 ↓	12 ↔	12 ↔	8 ↓							
30	16 ↔	16 ↔										
31	9 ↔	9 ↔										
32	12 ↔	12 ↔										
33	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
34	16 ↔	16 ↔										
35	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔
36		16 ↔	16 ↔									
37		12										
38			20 ↔	20 ↔	20 ↔	20 ↔						
39			12	12 ↔	16 ↑	16 ↔						
40			20 ↔	20 ↔	20 ↔	20 ↔	20 ↔	15 ↓	15 ↔	15 ↔	15 ↔	15 ↔
41				15	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔
42				12	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
43				15	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔
44				16	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
45				9	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔
46				16	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔	12 ↔
47				15	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔
48					15	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔
49						16						
50							16	9 ↓	9 ↔	9 ↔	9 ↔	9 ↔
51									20	20 ↔	20 ↔	20 ↔
52											20	20 ↔

Proposal

- On-going business rhythm of monthly ORR review and maintenance
- The roll out of the ORR to level 2 Committees paused due to interim covid governance arrangements until January 2021.
- To continue to horizon scan

Decision required

- Approve the closure of Risk 46
- Approve de-escalation of Risk 50
- Note the change in risk score for Risk 23
- To confirm a level of assurance over the management of strategic risk on the ORR.

Governance table

For Board and Board Committees:	Trust Board	
Paper sponsored by:	Chris Oakes, Director of Governance and Risk	
Paper authored by:	Kate Dyer, Head of Governance and Interim Trust Secretary	
Date submitted:	15 December 2020	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):	Regular ORR reports to level 1 Committees and the Trust Board. This December 2020 version has not been to any other forum.	
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:	NA	
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	Each meeting	
STEP up to GREAT strategic alignment*:	High Standards	Yes
	Transformation	Yes
	Environments	Yes
	Patient Involvement	Yes
	Well Governed	Yes
	Single Patient Record	Yes
	Equality, Leadership, Culture	Yes
	Access to Services	Yes
	Trust wide Quality Improvement	Yes
Organisational Risk Register considerations:	List risk number and title of risk	Yes
Is the decision required consistent with LPT's risk appetite:	Yes	
False and misleading information (FOMI) considerations:	None	
Positive confirmation that the content does not risk the safety of patients or the public	Confirmed	
Equality considerations:	None	