

Trust Board – 27 September 2022

Organisational Risk Register

Purpose of the report

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.

Analysis of the issue

There are currently 23 risks on the ORR, of which, three are presented for closure and one new risk is presented in draft for approval.

Of the 23 risks, eight (35%) have a high current risk score. The high-risk profile for the Trust includes the following areas;

- FM provision
- Waiting lists
- Cyber threat
- Financial position
- Electronic Patient Record
- Vacancy rate (safety and quality)
- High agency usage (finance)
- Medical capacity in CMHT (DRAFT)

Since the last Trust Board on 26 July 2022 the following changes have been approved by the level 1 committees;

Approved Closures

- **Risk 57** The lack of an embedded clinical and quality governance infrastructure may result in insufficient or inconsistent application of systems and processes, resulting in poor quality care and patient harm

The revised clinical governance framework and team re-structure has been completed, which mitigates the risk score down to the target residual score. This risk was approved for closure by the Quality Assurance Committee (QAC) in August 2022.

- **Risk 60** A high vacancy rate for registered nurses, AHPs, HCSWs and medical staff, is leading to high agency staff usage, which may result in poor quality care and patient harm.

This risk has been separated into two new risks, one which focusses on safe staffing and patient quality and safety (Risk 84 with QAC oversight – see below), and the other which focusses on the financial element of the high vacancy factor (Risk 85 with FPC oversight). This closure was approved by the QAC in August 2022.

- **Risk 62** Insufficient understanding and oversight of regulatory standards and key lines of enquiry may result in non-compliance and/or insufficient improvement in priority areas, leading to sub-standard care.

The implementation of the Foundations for High Standards programme as business as usual supports the ongoing improvement in this area and sufficiently mitigates the risk. This risk was approved for closure by the QAC in August 2022.

Approved new risk

- **Risk 83** Restricted access and use of electronic patient record systems will result in incomplete electronic patient records including the recording of physical observations. This will impact on the delivery of effective and safe patient care

This was approved by the Finance and Performance Committee (FPC) in August 2022. It captures the risks associated with the SystmOne / Brigid usage.

- **Risk 84** A high vacancy rate for registered nurses, AHPs, HCSWs and medical staff, is leading to high temporary staff usage, which may impact on the quality of patient outcomes, safety, quality and experience.

This was approved by the QAC in August 2022 and replaces Risk 60. Further detail around mitigations will be provided pending approval of the workforce plan.

- **Risk 85** High agency usage is resulting in high spend, which may impact on the delivery of our financial targets for 2022/23

This risk, which focusses on the financial element of the high vacancy factor was approved by the FPC in August 2022

ORR risks September 2022

No.	Title	SU2G	Initial risk	Current risk	Residual Risk	Tolerance
58	<i>Insufficient Safeguarding competency may result in limitations on service provision, which may result in poor quality care and patient harm.</i>	High Standards	12	12	8	16-20
59	Lack of staff capacity in causing delays in the incident management process, including the review and closure of a backlog of reported incidents, the investigation and report writing of SIs and the closure of resulting actions. This will result in delays in learning and could lead to poor quality care and patient harm as well as reputational damage.	High Standards	12	12	8	16-20
61	A lack of staff with appropriate skills will not be able to safely meet patient care needs, which may lead to poor patient outcomes and experience.	High Standards	16	12	8	16-20
64	If we do not retain existing and/or develop new business opportunities, we will have less financial sustainability and infrastructure resulting in a loss of income and influence within the LLR system.	Transformation	12	12	9	9-11
65	The present FM provision does not meet our quality standards or requirements, leading to the inability to provide the full hard and soft Facilities Management and maintenance service within LPT. This impacts compliance, timeliness of maintenance responses and quality of services for patients, staff and visitors.	Environments	16	16	12	16-20
66	The lack of detail around accommodation requirements in strategic business planning, means that the Estates Strategy cannot adequately plan for potential building solutions, leading to an estate configuration which is not fit to deliver high quality healthcare.	Environments	12	12	8	16-20
67	The Trust does not have a Green Plan or identified resource for the green agenda, leading to non-compliance with the NHS commitment to NHS Carbon Zero.	Environments	12	12	9	9-11
68	A lack of accessibility and reliability of data reporting and analysis will impact on the Trust's ability to use information for decision	Well Governed	16	12	8	9-11

	making, which may impact on the quality of care provided.					
69	If we do not appropriately manage performance, it will impact on the Trust's ability to effectively deliver services, which could lead to poor quality care and poor patient experience.	Well Governed	8	8	4	9-11
72	If we do not have the capacity and commitment to proactively reach out, we will not fully address health inequalities which will impact on outcomes within our community.	Reaching Out	16	12	8	16-20
73	If we don't create an inclusive culture, it will affect staff and patient experience, which may lead to poorer quality and safety outcomes.	Equality, Leadership and Culture	12	12	9	16-20
74	As a result of covid 19, winter pressure, service recovery and workforce restoration there is a risk that our staff's health and wellbeing will be compromised, leading to increased sickness levels.	Equality, Leadership and Culture	9	9	6	16-20
75	Increasing numbers of patients on waiting lists and increasing lengths of delay in accessing services will mean that patients may not be able to access the right care at the right time and may lead to poor experience and harm.	Access to Services	16	16	8	16-20
77	<i>Without the appropriate level of focus, resource and preparation, the Trust cannot adequately support the National Public Inquiry into the Covid Pandemic, leading to a lack of lessons learned, inability to respond effectively to future situations and major incidents, a failure to comply with the Public Inquiry statute and reputational damage.</i>	Well Governed	12	8	8	9-11
78	Inability to sustain the level of cleanliness required within the National Cleanliness Standards and Hygiene Code	Environment / High Standards	12	12	8	9-11
79	The Cyber threat landscape is currently considered significant due to the geopolitical conflicts, high prevalence of cyber-attack vectors, increase in published vulnerabilities, etc which could lead to a significant impact on IT systems that support patient services and potential data breaches	Well Governed	16	16	8	16-20
80	If staff are not vaccinated against influenza, 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 staffing challenges and a risk to those who are vulnerable.	High Standards / Equality, Leadership and Culture	20	12	8	16-20
81	Inadequate control, reporting and management of the Trust's 2022/23 financial position could mean we are unable to deliver our financial plan and adequately contribute to the LLR system plan, resulting in a breach of LPT's statutory duties and financial strategy (including LLR strategy)	Well Governed	15	20	15	9-11
82	<i>The loss of the 11+ healthy together contract will mean a change in delivery for this service from LPT to the LA, impacting on Trust staff and income, and continuity of care for secondary school aged children.</i>	High Standards	16	12	12	16-20
83	Restricted access and use of electronic patient record systems will result in incomplete electronic patient records including the recording of physical observations. This will impact on the delivery of effective and safe patient care	High Standards	16	16	12	16-20
84	A high vacancy rate for registered nurses, AHPs, HCSWs and medical staff, is leading to high temporary staff usage, which may impact on the quality of patient outcomes, safety, quality and experience.	High Standards	16	16	8	16-20
85	High agency usage is resulting in high spend, which may impact on the delivery of our financial targets for 2022/23	Well Governed	20	16	16	9-11
86 DRAFT	<i>A lack of capacity within the workforce model and a high vacancy rate is reducing our ability to assess and follow up patients in community mental health services in a timely way, impacting on the safety of care and the mental wellbeing for our patients.</i>	High Standards	20	16	16	16-20

Proposal

Additions

- **Risk 86** DRAFT A lack of capacity within the workforce model and a high vacancy rate is reducing our ability to assess and follow up patients in community mental health services in a timely way, impacting on the safety of care and the mental wellbeing for our patients.

Closures

- **Risk 58** Insufficient Safeguarding competency may result in limitations on service provision, which may result in poor quality care and patient harm.

The safeguarding training has been updated and is now fully compliance with the national standards and guidelines. A training programme has been scheduled. The current score is in line with the residual now that all actions have been completed and gaps have been mitigated. The risk score is lower that our risk appetite.

- **Risk 77** Without the appropriate level of focus, resource and preparation, the Trust cannot adequately support the National Public Inquiry into the Covid Pandemic, leading to a lack of lessons learned, inability to respond effectively to future situations and major incidents, a failure to comply with the Public Inquiry statute and reputational damage.

Resource for preparatory work has now ended and an action plan for further ongoing oversight of the requirement of the Public Inquiry have been presented to the Strategic Executive Board. The current risk score is in line with the residual now that the preparatory action has now ended.

- **Risk 82** The loss of the 11+ healthy together contract will mean a change in delivery for this service from LPT to the LA, impacting on Trust staff and income, and continuity of care for secondary school aged children.

Actions have been completed to deliver the change on Healthy Together and the current risk score is in line with the residual, this is lower than our appetite.

Decision required

- Approval of risk 86
- Closure of risks 58, 77 and 82

Governance Table

For Board and Board Committees:	Trust Board 27 September 2022	
Paper sponsored by:	Chris Oakes, Director of Governance and Risk	
Paper authored by:	Kate Dyer, Deputy Director of Governance and Risk	
Date submitted:	20 September 2022	
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):	None	
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:		
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	Regular	
STEP up to GREAT strategic alignment*:	High Standards	Yes
	Transformation	Yes
	Environments	Yes
	Patient Involvement	Yes
	Well Governed	Yes
	Reaching Out	Yes
	Equality, Leadership, Culture	Yes
	Access to Services	Yes
	Trust wide Quality Improvement	Yes
Organisational Risk Register considerations:	All	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	