

Trust Board of Directors 29 November 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 21 risks on the ORR, of which, two are presented for closure and two new risks are presented in draft for approval.

Of the 21 risks, eight (38%) have a high current risk score. The high-risk profile for the Trust includes the following areas;

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

Since the last Trust Board on 27 September 2022 the following changes have been approved by the level 1 committees;

Closures

Risk 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.

Mitigating actions have been taken to reduce the current risk score to 8. Ongoing work to mitigate the risk has now become business as usual with ongoing oversight and scrutiny. This includes delivery of the Flu Plan, the flu campaign, national learning and the provision of incentives for staff. Flu is also included within the CQUIN schedule for this year. The closure of this risk was approved by the Quality Assurance Committee on the 25 October 2022.

No.	Title	SU2G	Initial	Current	Residual	Tolerance
			risk	risk	Risk	
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

ORR risks November 2022



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64	If we do not retain existing and/or develop new business	Transformation	12	12	9	9-11
	opportunities, we will have less financial sustainability and					
	infrastructure resulting in a loss of income and influence within the LLR system					
65	the LLR system. The present FM provision does not meet our quality standards or	Environments	16	12	12	16-20
05		Environments	10	12	12	16-20
	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.					
66	The lack of detail around accommodation requirements in	Environments	12	12	8	16-20
00	strategic business planning, means that the Estates Strategy	Linnonnents			Ŭ	10 20
	cannot adequately plan for potential building solutions, leading to					
	an estate configuration which is not fit to deliver high quality					
	healthcare.					
67	The Trust does not have a Green Plan or identified resource for	Environments	12	12	9	9-11
	the green agenda, leading to non-compliance with the NHS					
	commitment to NHS Carbon Zero.					
68	A lack of accessibility and reliability of data reporting and analysis	Well Governed	16	12	8	9-11
	will impact on the Trust's ability to use information for decision					
	making, which may impact on the quality of care provided.					
69	If we do not appropriately manage performance, it will impact on	Well Governed	8	8	4	9-11
	the Trust's ability to effectively deliver services, which could lead					
	to poor quality care and poor patient experience.					
72	If we do not have the capacity and commitment to proactively	Reaching Out	16	12	8	16-20
	reach out, we will not fully address health inequalities which will					
	impact on outcomes within our community.					
73	If we don't create an inclusive culture, it will affect staff and	Equality,	12	12	9	16-20
	patient experience, which may lead to poorer quality and safety	Leadership and				
	outcomes.	Culture				
74	As a result of covid 19, winter pressure, service recovery and	Equality,	9	9	6	16-20
	workforce restoration there is a risk that our staff's health and	Leadership and				
	wellbeing will be compromised, leading to increased sickness levels.	Culture				
75	Increasing numbers of patients on waiting lists and increasing	Access to	16	16	8	16-20
	lengths of delay in accessing services will mean that patients may	Services				
	not be able to access the right care at the right time and may lead					
78	to poor experience and harm. Inability to sustain the level of cleanliness required within the	Environment /	12	8	8	9-11
.0	National Cleanliness Standards and Hygiene Code	High Standards	12	0	0	5 11
79	The Cyber threat landscape is currently considered significant	Well Governed	16	16	12	16-20
	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					
01	services and potential data breaches		4.5	20	15	0.11
81	Inadequate control, reporting and management of the Trust's 2022/23 financial position could mean we are unable to deliver	Well Governed	15	20	15	9-11
	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)					
83	Restricted access and use of electronic patient record systems	High Standards	16	16	12	16-20
	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					
84	A high vacancy rate for registered nurses, AHPs, HCSWs and	High Standards	16	16	8	16-20
	medical staff, is leading to high temporary staff usage, which may					
	impact on the quality of patient outcomes, safety, quality and					
	experience.					
85	High agency usage is resulting in high spend, which may impact	Well Governed	20	20	16	9-11
06	on the delivery of our financial targets for 2022/23 A lack of capacity within the workforce model and a high vacancy	High Standards	20	20	16	16.20
86	rate is reducing our ability to assess and follow up patients in	High Standards	20	20	16	16-20
	community mental health services in a timely way, impacting on					
	the safety of care and the mental wellbeing for our patients.					
	Following the establishment of a new FM service, there is a rick of		16	16	12	16-20
87	Following the establishment of a new FM service, there is a risk of unknown issues based on historical maintenance resulting in the		10	10	12	10 20

		Trust not meeting its quality standards or requirements.				
ł	88	Risk of closed cultures within services that may lead to poor	12	12	8	16-20
		patient, staff and family experience and organisational and				
		reputational risk.				

Proposal

Minor Changes

Risk 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.

We have removed the reference to not having a green plan now that this is in place. The risk remains around the level of capacity to support further work and the risk that this creates around non-compliance with our commitment to NHS Carbon Zero.

Closures

We are proposing the closure of risks 65 and 78 alongside the addition of a new draft risk 87;

 Risk 65 The present FM provision does not meet our quality standards or requirements, leading to the inability to provide effective hard and soft Facilities Management and maintenance services. This impacts compliance, timeliness of maintenance responses and quality of estates provision for patients, staff and visitors.

This risk is proposed as closed now that the FM transformation has been completed and the inhouse team is now in place within the Trust. A new risk around any inherited unknowns has been captured within a newly proposed risk (see below risk 87)

- **Risk 78** If levels of cleanliness are not sustained, the Trust will not comply with the requirements of the National Cleanliness Standards and Hygiene Code which may impact on patient safety and experience.

This risk is proposed as closed. The remaining risk relating to the need for the Trust to meet the required cleaning standards has been included within the newly proposed risk 87 (as detailed below). Alongside this, consideration is being given to the addition of an operational risk on the directorate risk registers around the management and oversight of cleaning, including outcome of audits and checklists.

New risks

- **Risk 87** Following the establishment of a new FM service, there is a risk of unknown issues based on historical maintenance resulting in the Trust not meeting its quality standards or requirements.

This risk has arisen following the FM transfer and the inherited service from the previous FM provider. Detail is provided in the draft risk within the full ORR pack.

- **Risk 88** Risk of closed cultures within services that may lead to poor patient, staff and family experience and organisational and reputational risk.

The potential significant impact of closed cultures, demonstrated recently in the media is a strategic risk for every NHS trust, including LPT. Detail is provided in the draft risk within the full ORR pack.

Decision required

- Approval of changes to risk 67
- Closure of risks 65 and 78
- Approval of new risks 87 and 88



Governance Table

For Board and Board Committees:	Trust Board 29 November 2022			
Paper sponsored by:	Chris Oakes, Director of Governance and F	is Oakes, Director of Governance and Risk		
Paper authored by:	Kate Dyer, Deputy Director of Governance and Risk			
Date submitted:	20 November 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 S tandards	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			