H

Trust Board 31 January 2023

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 19 risks on the ORR, of which seven have a high current risk score. The high-risk profile for the Trust includes the following areas;

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

There are four risks where the current risk score is higher than the tolerance level, and the projected residual score will bring the risk in line with appetite. There is one risk (Risk 85 high agency spend) where the residual score (16) is higher than the appetite (9-11). This indicates that further mitigation action will be needed to bring the risk score down within agreed tolerance levels.

Since the last Trust Board meeting on 29 November 2022 the following changes have been agreed by the level 1 committees;

Changes in wording to risk

The QAC approved a change in wording **for Risk 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'**. This now reads **Risk 74 ' The impact of additional pressures on service delivery may compromise the health and wellbeing of our staff, leading to increased sickness levels'**.

This is intended to clarify that any situation impacting on our current service delivery (more broadly than covid, recovery and restoration), which may include the cost of living, strike action, increasing demand etc. could impact on the level of sickness in the Trust.

ORR risks January 2023

No.	Title	SU2G	Initial risk	Current risk	Residual Risk	Tolerance
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
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 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 making, which may impact on the quality of care provided.	Well Governed	16	12	8	9-11
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	9	6	16-20
74	The impact of additional pressures on service delivery may compromise the health and wellbeing of our staff, 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
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	12	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	9	9	9-11
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	20	16	9-11
86	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.	High Standards	20	20	16	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 Trust not meeting its quality standards or requirements.		16	16	12	16-20
88	Risk of closed cultures within services that may lead to poor patient, staff and family experience and organisational and reputational risk.		12	12	8	16-20

Proposal

An information slide detailing our approach to risk scoring and appetite has been included at the end of the full slide pack to provide clarity for people using the ORR.

Changes to Scoring

Risk 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)

The consequence risk score has reduced from 5 to 3 which has brought the overall score down to 9. Last month the likelihood score reduced as we had approved the revised deficit plan. The rationale for reducing the consequence score is that NHSE has asked the system to deliver a £20m deficit which has been agreed, and LPT's forecast reconciles with the target. The planning guidance states that additional capital allocations next year will be based on delivering either break even or agreed NHSE deficit plans.

Decision required

Trust board is assured by the risk management process and that the ORR continues to be reflect the risks relevant to the Trust.

Governance Table

For Board and Board Committees:	Trust Board 31 January 2023	
Paper sponsored by:	Chris Oakes, Director of Governance and Risk	
Paper authored by:	Kate Dyer, Deputy Director of Governance and Risk	
Date submitted:	22 January 2023	
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 **G**overned	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	