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Trust Board 28 March 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 20 strategic 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 is one risk (Risk 85 high agency spend) where the residual score (16) is being tolerated at a higher level than the Trust's cautious appetite for financial risk (9-11). The toleration of this risk, and consideration of further mitigation action is reviewed monthly in line with the Executive Director risk review cycle.

Following approval at the January 2023 Trust Board meeting, a new level 1 'People and Culture Committee' was introduced to gain assurance over significant strategic workforce risks. The three ORR risks relating to delivery of the Equality, Leadership and Culture element of our Step Up To Great (SUTG) strategy have therefore been moved from the oversight of the Quality and Safety Committee (QSC) to the People and Culture Committee;

- Risk 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.
- Risk 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.
- Risk 74 The impact of additional pressures on service delivery may compromise the health and wellbeing of our staff, leading to increased sickness levels.

There are also currently two further risks on the ORR which rely on workforce related actions to provide mitigations;

- 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 (High Standards risk overseen by the Quality and Safety Committee).
- Risk 85 High agency usage is resulting in high spend, which may impact on the delivery of our financial targets for 2022/23 (Well Governed risk held by the Finance and Performance Committee).

The People and Culture Committee will be reviewing action plans relating to wider workforce issues, these will relate to risks 84 and 85; the assurance ratings provided by the Committee will be shared with the Quality and Safety Committee and the Finance and Performance Committee in the ORR



summary reports so that a wider assessment of the risk is achieved. Risks 84 and 85 will be included within the People and Culture ORR summary report for information from April 2023.

The addition of risk 89 was approved by the QSC in February 2023;

Risk 89 Following the transfer of soft FM service, there are potential gaps in the sustainability of compliance with national cleaning standards and waste regulation which may impact on healthcare acquired infections and patient outcomes.

Strategic risks March 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.	Equality, Leadership and Culture	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	12	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	Well Governed	15	9	9	9-11



	strategy (including LLR strategy)					
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.	Environment	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.	High Standards	12	12	8	16-20
89	Following the transfer of soft FM service, there are potential gaps in the sustainability of compliance with national cleaning standards and waste regulation which may impact on healthcare acquired infections and patient outcomes.	Environment	12	12	8	16-20

Proposal

Changes to Scoring

Risk 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.

The residual risk has increased from 8 to 12 due to issues impacting on the delivery of actions. The residual score is now higher than the Trust's cautious appetite for regulatory risk. Actions will be monitored during March and April 2023 and a further update will be provided to the Finance and Performance Committee next month.

Decision required

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



Governance Table

For Board and Board Committees:	Trust Board 28 March 2023			
Paper sponsored by:	Chris Oakes, Director of Governance and Risk			
Paper authored by:	Kate Dyer, Deputy Director of Governance and Risk			
Date submitted:	nitted: 22 March 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			