### Trust Board 30 May 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 23 risks on the ORR, of which 9 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
- 23/24 financial position
- Access to Neurodevelopmental Assessment and Follow Up
- Access to 5-19 Service

This month, one risk has reduced from a high current score to a 12 to reflect the lower likelihood of the risk materialising; this relates to 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'.

There are four risks where the current risk scores are higher than the tolerance level (risks 67,68,85 & 90), of these, there are two (85 high agency spend and 90 financial position) where the residual scores are higher than the appetite. 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 28 March 2023, three news risks have been approved for inclusion; the 23/24 financial position (risk 90), the ADHD waiting list (risk 91), and waiting times for the 5-19 service (risk 92).

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ORR risks May 2023

No.	litle	SU2G	risk	risk	Residual Risk	l oleran ce
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	9	6	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	Environments	12	12	8	16-20

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Initial Current Residual Teleran



	which is not fit to deliver high quality healthcare.					
67	The Trust does not have identified resource for the green agenda,	Environments	12	12	9	9-11
	leading to non-compliance with the NHS commitment to NHS Carbon					
	Zero.					
68	A lack of accessibility and reliability of data reporting and analysis will	Well Governed	16	12	8	9-11
	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 the	Well Governed	8	8	4	9-11
	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 reach	Reaching Out	16	12	8	16-20
	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 patient	Equality,	12	9	6	16-20
	experience, which may lead to poorer quality and safety outcomes.	Leadership and				
		Culture				
74	The impact of additional pressures on service delivery may compromise	Equality,	9	9	6	16-20
	the health and wellbeing of our staff, leading to increased sickness	Leadership and				
	levels.	Culture				
75	Increasing numbers of patients on waiting lists and increasing lengths	Access to	16	16	8	16-20
	of delay in accessing services will mean that patients may not be able	Services				
	to access the right care at the right time and may lead to poor					
	experience and harm.					
79	The Cyber threat landscape is currently considered significant due to	Well Governed	16	16	12	16-20
	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					
81	Inadequate control, reporting and management of the Trust's 2022/23	Well Governed	15	9	9	9-11
01	financial position could mean we are unable to deliver our financial	inen oorenneu	10	Ĵ.	, j	5 11
	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 will	High Standards	16	16	12	16-20
	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 medical	High Standards	16	16	8	16-20
0.	staff, is leading to high temporary staff usage, which may impact on the	ingir standards	10	10	Ŭ	10 20
	quality of patient outcomes, safety, quality and experience.					
85	High agency usage is resulting in high spend, which may impact on the	Well Governed	20	20	16	9-11
	delivery of our financial targets for 2022/23					
86	A lack of capacity within the workforce model and a high vacancy rate	High Standards	20	20	16	16-20
	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.					
87	Following the establishment of a new FM service, there is a risk of		16	12	12	16-20
	unknown issues based on historical maintenance resulting in the Trust				12	10 20
	not meeting its quality standards or requirements.					
88	Risk of closed cultures within services that may lead to poor patient,		12	12	8	16-20
	staff and family experience and organisational and reputational risk.					
89	Following the transfer of soft FM service, there are potential gaps in		12	12	8	16-20
	the sustainability of compliance with national cleaning standards and					
	waste regulation which may impact on healthcare acquired infections and patient outcomes.					
90	Inadequate control, reporting and management of the Trust's 2023/24		16	16	12	9-11
50	financial position could mean we are unable to deliver our financial		10	10	12	5-11
	plan and adequately contribute to the LLR system plan, resulting in a					
	breach of LPT's statutory duties and financial strategy (including LLR					
	strategy).					
91	Increasing numbers of patients on waiting lists and increasing lengths		20	20	16	16-20
	of delay in accessing diagnostic services for ADHD and ASD and timely					
	follow-up, mean that patients may not be able to access the right care					
0.2	at the right time and may lead to poor outcomes and harm.			20		10.00
92	Increasing demand and insufficient staffing is resulting in long wait		20	20	8	16-20
	times for the 5-19 service, which may cause harm to our patients and					

## Proposal

Ongoing monthly risk review with executive directors.

## **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 30 May 2023			
Paper sponsored by:	Kate Dyer, Acting Director of Corporate Governance			
Paper authored by:	Kate Dyer, Acting Director of Corporate Governance			
Date submitted:	22 May 2023			
State which Board Committee or other forum within the Trust's	None			
governance structure, if any, have previously considered the				
report/this issue and the date of the relevant meeting(s):				
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	Regular			
update report will be provided for the purposes of corporate				
Agenda planning				
STEP up to GREAT strategic alignment*:	High <b>S</b> 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	Confirmed			
of patients or the public				
Equality considerations:	None			