

Trust Board 25 July 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 21 risks on the ORR, of which 11 have a high current risk score. The high-risk profile for the Trust includes the following areas;

- Waiting lists
- Cyber threat
- Technology
- Vacancy rate (safety and quality)
- High agency usage (finance)
- Medical capacity in CMHT
- FM Service
- National Cleaning Standards
- 23/24 financial position
- Access to Neurodevelopmental Assessment and Follow Up
- Access to 5-19 Service

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, or that a higher level of risk will need to be tolerated.

Changes since the last Trust Board in June 2023

- **Risk 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.

This risk was approved for closure by the Finance and Performance Committee on the 27 June 2023. The performance report has been revised and there is ongoing quality & safety dashboard development with no strategic risk identified with this programme of continuous improvement.

- **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).

This risk was approved for closure by the Finance and Performance Committee on the 27 June 2023 following the sign off of the annual accounts at the 20 June 2023 EGM.

Changes in June 2023

- **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

Following a detailed review of this risk, including consideration of the risk title which reflects both the technology and clinical perspectives, we are recommending that the title be clarified as;

Risk 83 Inadequate access to and adoption of new technology hinders staff ability to maximise the advantages of the technology which impacts on the delivery of patient care.

- **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.

The current score has increased (from 12 Medium to 16 High) and the residual score has increased (from 8 Medium to 12 Medium). The risk of not complying with the national cleaning standards in critical areas is elevated until the recruitment process for cleaning staff is complete and they are in post.

ORR risks July 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	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 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	12	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
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
83	Inadequate access to and adoption of new technology hinders staff ability to maximise the advantages of the technology which impacts on the delivery of 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 2023/24	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
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.		12	16	12	16-20
90	Inadequate control, reporting and management of the Trust's 2023/24 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).		16	16	12	9-11
91	Increasing numbers of patients on waiting lists and increasing lengths 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 at the right time and may lead to poor outcomes and harm.		20	20	16	16-20
92	Increasing demand and insufficient staffing is resulting in long wait times for the 5-19 service, which may cause harm to our patients and may prevent us from meeting our statutory responsibilities.		20	20	8	16-20

Proposal

Ongoing monthly risk review with executive directors and risk leads.

Decision required

Approve the changes to risk title for Risk 83

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 25 July 2023	
Paper sponsored by:	Kate Dyer, Acting Director of Corporate Governance	
Paper authored by:	Kate Dyer, Acting Director of Corporate Governance	
Date submitted:	12 July 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 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
	All	Yes
Organisational Risk Register considerations:	All	
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	