

# Trust Board 30 January 2024

## **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 risks on the ORR, of which 8 have a high current risk score. The high-risk profile by strategic objective for the Trust includes the following areas;

High Standards (3)



- Access and use of Technology (risk 83)
- Medical capacity in CMHT (risk 86)
- Vacancy rate (risk 94)

Environment (1)



Cleaning Standards (risk 89)

Well Governed (1)



Cyber threat (risk 79)

Equality, Leadership and Culture (1)



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- Recruitment pipeline (risk 95)

Access to Services (2)

- Waiting lists (risk 75)

Access to Neurodevelopmental Assessment and Follow Up (risk 91)

No new risks have been identified for inclusion onto the ORR and there are no significant changes to the risks this month.

#### ORR risks January 2024

No.	Title	SU2G	Initial	Current	Residual	Toleran
			risk	risk	Risk	ce
59	Lack of staff capacity in causing delays in the incident management	High Standards	12	12	8	16-20
	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.					
61	A lack of staff with appropriate skills will not be able to safely meet	High Standards	16	8	8	16-20
	patient care needs, which may lead to poor patient outcomes and					
	experience.					
64	If we do not retain existing and/or develop new business opportunities,	Transformation	12	9	6	9-11
	we will have less financial sustainability and infrastructure resulting in a					
	loss of income and influence within the LLR system.					



67	The Trust does not have identified resource for the green agenda, leading to non-compliance with the NHS commitment to NHS Carbon	Environment	12	12	12	9-11
	Zero.					
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	9	16-20
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
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	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).	Well Governed	16	12	8	9-11
91	There is a risk that CYP and adults within LLR do not receive timely diagnosis and treatment for neurodevelopmental conditions, specifically autism and ASD. Delays result in failure to meet statutory obligations for SEND, as well as adverse psycho-social outcomes for people, including an increase in morbidly and mortality as well as an increased financial cost to the health, education, social care and criminal justice systems'	Access to Services	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.	Access to Services	20	12	8	16-20
93	To ensure that LPT is able to provide core services in the event of any incident	Well Governed	9	9	6	9-11
94	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 delivery of our financial targets for this year.	High Standards	20	20	16	16-20
95	The backlog in the recruitment pipeline could lead to delays in onboarding new staff, or the withdrawing of candidates during the recruitment process	Equality, Leadership and	20	20	16	16-20

# Proposal

Ongoing monthly risk review with executive directors and risk leads.

# **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 January 2024			
Paper sponsored by:	Kate Dyer, Acting Director of Corporate Governance			
Paper authored by:	Kate Dyer, Acting Director of Corporate Governance			
Date submitted:	30 January 2024			
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	confirmation that the content does not risk the safety Confirmed			
of patients or the public				
Equality considerations:	None			