



PUBLIC BOARD

20 May 2021

Corporate Risk Register

Presented for:	Assurance
Presented by:	Julian Hartley, Chief Executive Phil Wood, Chief Medical Officer Simon Worthington, Director of Finance Lisa Grant, Chief Nurse Jenny Lewis, Director of Human Resources and Organisational Development Paul Jones - Chief Digital and Information Officer Clare Smith - Chief Operating Officer Craig Richardson - Director of Estates and Facilities
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Previous Committees	Risk Management Committee 1 April 2021 and 6 May 2021

Trust Goals	
The best for patient safety, quality and experience	✓
The best place to work	✓
A centre for excellence for research, education and innovation	✓
Seamless integrated care across organisational boundaries	✓
Financial sustainability	✓

Trust Risks (Type & Category)				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Risk
Workforce Risk		• Workforce supply	Cautious	↔ (same)
Operational Risk		• Business continuity	Cautious	↔ (same)
Clinical Risk		• Capacity planning • Infection prevention and control • Patient safety and outcomes	Minimal	↔ (same)
Financial Risk		• Financial management and waste reduction	Cautious	↔ (same)
External Risk		• Regulatory risk	Averse	↔ (same)

Key points	
1. There are currently 23 material risks included in the Corporate Risk Register for the Board’s consideration and oversight.	Information
2. Members of the Board of Directors are invited to: <ul style="list-style-type: none"> (i) consider, challenge and confirm the correct strategy has been adopted to ensure potentially significant risks are kept under prudent control (ii) consider and approve the changes to significant risks following the meetings of the Risk Management Committees held on 1 April 2021 and 6 May 2021 (iii) advise on any further risk treatment required. 	Discussion

1. Summary

1.1 The significant risk profile provides Directors with details of all identified significant risk exposures throughout Leeds Teaching Hospitals NHS Trust. These risks are currently subject to monthly review and have been reviewed by the Risk Management Committee on two occasions (1 April 2021 and 6 May 2021) since the last meeting of the Board. This report has been updated to summarise the decisions made by the Risk Management Committee.

1.2 The Trust has identified a range of significant risks, which are currently being mitigated, whose impact could have a direct bearing on requirements within the NHS Improvement Accountability Framework, CQC registration or the achievement of Trust aims and objectives should the mitigation plans be ineffective. Currently, the significant risks relate to the following areas:

- **Safety and Quality:** nurse staffing levels, medical staffing, including doctors in training, healthcare acquired infection, violence due to organic, mental health or behavioural reasons, viral pandemic, power failure/lack of IPS/UPS resilience due to the electrical infrastructure, capacity to treat patient due to COVID-19, staff health, safety and wellbeing due to COVID-19, Patient Administration System, additional staffing capacity (COVID-19) Nightingale Y&H, delivery of the Leeds & West Yorkshire Vaccination Programme and patient harm related to falls and hospital acquired pressure ulcers (COVID-19).
- **Performance and Regulation:** achieving the Emergency Care Standard, 18-week RTT target, 62-day cancer target, 28-day cancelled operation target, patient flow and capacity for emergency admissions, levels of medical outliers, patients waiting 52-week+ in spinal injuries and colorectal services, patients waiting longer than 6 weeks following referral for diagnostics tests.

Finance: delivery of financial targets in 2021/22, capital resources and delays in completing capital programmes, delivery of the refurbishment of the Generating Station Complex at LGI, risks associated with Building the Leeds Way – hospital of the future project, pathology project.

A summary of the main controls and mitigating actions for the significant risks in each area is available in Appendix A.

1.3 Significant Risks

Risks reviewed at the April 2021 Risk Management Committee

CRRS2 Insufficient Medical Staff to deliver service

This risk had been reviewed and updated by the General Manager for the Medical Directorate in conjunction with the Chief Medical Officer with an update on the further mitigating actions, including a new gateway programme, with UK nationals who have studied medicine in Bulgaria. There was no proposed change to the score of 16.

CRRP3 62-day cancer target

This risk had been reviewed and updated by the Chief Operating Officer with an update of controls and further mitigating, including a weekly review of breaches relating the 62 day cancer target and a review of the Root Cause Analysis (RCA) pathway has been undertaken to determine CSU recovery plans with a view to develop plans in Q1 2021/22. There was no proposed change to the risk score of 16.

CRRP6 Unsustainable levels of medical outliers

This risk had been reviewed and updated by the Chief Operating Officer with an update of controls and further mitigating actions, including the implementation of the new national discharge guidance and a quality improvement faculty has been established to implement the Reasons To Reside Project Trust wide, with expected launch in April 2021. There was no proposed change to the risk score of 15.

CRRP7 52 week RTT target non-compliance in spinal injuries and colorectal services

This risk had been reviewed and updated by the Chief Operating Officer with an update of controls and further mitigating; including service delivery contracts currently being developed at CSU level, which will include a specific KPI on reducing longest outpatient waits. There was no proposed change to the risk score of 16.

CRRS16 Risk of re-commencing normal activity levels due to reduced capacity (COVID-19)

This corporate risk had been updated by the Chief Operating Officer to reflect the further mitigating actions, including clinical validation underway to identify and prioritise capacity to treat patients. There was no proposed change to the risk score of 20.

CRRS17 Staff health, safety and wellbeing during the COVID-19 pandemic

This proposed corporate risk was developed, guided by the national Publication Working Safely during Covid-19. The further actions to improve the health and wellbeing of staff were considered, in addition to roll-out of the vaccination programme. There was a recommendation to reduce the risk score from 20 to 16 and this was agreed by the Committee.

CRRS19 Additional staffing capacity (COVID-19) Nightingale Y&H

This corporate risk had been reviewed by the Chief Nurse and the Director of Quality. Nightingale Y&H was being de-commissioned, it was recommended that this risk remained on the corporate risk register until the building had been fully de-commissioned. Once this had been confirmed the risk score would be reviewed and this risk would be removed from the corporate risk register.

CRRS20 - Delivering (COVID-19) Vaccination programme

This corporate risk had been updated by the Chief Medical Officer and Director of Quality to reflect the risk description, controls and further mitigating actions in response to the delivery of the West Yorkshire Vaccination programme. It was noted that a new vaccine was due to come online in April, therefore the risk description will be further

reviewed to reflect the development of the programme. There was no proposed change to the risk score of 16.

Risks reviewed at the May 2021 Risk Management Committee

CRRF1 Failure to deliver the financial plan 2021/22

This corporate risk had been reviewed and updated by the Associate Director of Finance in conjunction with the Director of Finance with an update on the further mitigating actions, including executive review of backlog work and COVID-19 expenditure that was likely to be subject to further scrutiny. There was no proposed change to the score of 20.

CRRF4 Risk of failure to deliver the hospital of the future project.

This corporate risk had been reviewed and updated by the Building the Leeds Way Programme Manager in conjunction with the Director of Finance, with an update on the further mitigating actions, including introducing DHSC Gateway Review process following issue of the central DHSC guidance. There were some risks to delivering the project by the target date 2025 and this would continue to be overseen by the programme board. There was no proposed change to the score of 16.

CRRF5 Risk of failure to deliver the pathology project.

This corporate risk had been reviewed and updated by the Building the Leeds Way Programme Manager in conjunction with the Director of Finance, with an update on the further mitigating actions, including completing pre-RIBA stage 3 submission review of value engineering and cost reduction proposals. There was no proposed change to the score of 16.

CRRS16 Risk of re-commencing normal activity levels due to reduced capacity (COVID-19)

This corporate risk had been updated by the Chief Operating Officer and the Director of Quality to reflect the further mitigating actions, including an update on the development of activity plans in line with Operational Planning Guidance to deliver required activity levels and the process for review and clinical validation of patients awaiting a follow up appointment now in place. There was no proposed change to the score of 20.

CRRS17 Staff health, safety and wellbeing during the COVID-19 pandemic

This corporate risk had been reviewed by the Director of Human Resources and continued to be reviewed regularly and overseen by the HR team and Workforce Committee. The additional controls related to health and wellbeing of staff as a consequence of infection prevention and control, and fatigue from working in a hospital environment for a prolonged period of time. This risk was exacerbated by the loosening of restrictions in public places, recognising that the restrictions would be maintained in hospitals after the June announcement. There was no proposed change to the score of 16.

CRRS19 Additional staffing capacity (COVID-19) Nightingale Y&H

The Chief Nurse provided an update on this corporate risk in conjunction with the Director of Estates and Facilities confirming that the Nightingale contract had now been terminated; the process of reinstatement had commenced and would run until the end of June, which is when the licence to access would expire. This meant that the Nightingale location was now a construction site and there was no patient activity being conducted at this location. The Chief Nurse recommended to the Committee that this corporate risk was removed from the corporate risk register as a consequence of the contract being terminated and this was agreed by the Committee.

CRRS20 Delivery of the Leeds & West Yorkshire Vaccination programme

This corporate risk had been updated by the Chief Medical Officer and the Director of Quality to reflect the further mitigating actions, including an update on the training plans implemented for current staff and new staff coming through the training pod, the introduction of the Moderna vaccine and the actions that had been taken at the Elland Road location to mitigate the risk as a consequence of using two different vaccines at this location. The Committee were also advised that the Thackray location would close in May and further modelling would be done to take into account the requirement for a potential booster vaccination in the autumn and winter period. There was no proposed change to the risk score of 16.

Proposed new Corporate Risks

No new corporate risks identified.

2. Risk

The Risk Management Committee provides Executive oversight of the Trust’s most significant risks, which cover the level 1 risk categories (see summary on front sheet). Following discussion at the April and May Committee meetings there were no material changes to the risk appetite statements related to the level 2 risk categories and the Trust continues to operate within the risk appetite for the level 1 risk categories set by the Board.

3. Financial Implications and Risk

See specific risks for details (where applicable).

4. Communication and Involvement

The Corporate Risk Register is made available for review to executive directors, corporate teams and CSUs at the monthly Risk Management Committee.

5. Equality Analysis

No adverse implications identified under equality and diversity legislation.

6. Publication Under Freedom of Information Act

This paper is made available under the Freedom of Information Act 2000.

7. Recommendations

Members of the Trust Board are invited to:

- consider, challenge and confirm the correct strategy has been adopted to keep potential significant risk under prudent control.
- consider and approve the changes to significant risks following the meeting of the Risk Management Committee; and
- advise on any further risk treatment required.

8. Supporting Information

Corporate Risk Register - Appendix A.

Craig Brigg
Director of Quality
May 2021