



## PUBLIC BOARD

27 January 2022

### Corporate Risk Register

<b>Presented for:</b>	Assurance
<b>Presented by:</b>	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
<b>Author</b>	Craig Brigg, Director of Quality
<b>Previous Committees</b>	Risk Management Committee 2 December 2021 and 6 January 2022

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		<ul style="list-style-type: none"> <li><b>Workforce supply</b> We will deliver safe and effective patient care through having adequate systems and processes in place to ensure the Trust has access to appropriate levels of workforce supply.</li> </ul>	Cautious	↔ (same)
Operational Risk		<ul style="list-style-type: none"> <li><b>Business continuity</b> We will develop and maintain stable and resilient services, operating to consistently high levels of performance.</li> </ul>	Cautious	↔ (same)

Clinical Risk		<ul style="list-style-type: none"> <li>• <b>Capacity planning</b> We will ensure that capacity is planned to meet the demand for elective and no-elective (acute) admissions to our hospitals, managing this risk to provide safe treatment and care to our patients.</li> <li>• <b>Infection prevention and control</b> We will manage the risks related to infection prevention and control to reduce the transmission of infection in our hospitals.</li> <li>• <b>Patient safety and outcomes</b> We will provide high quality services to patients and manage risks that could limit the ability to achieve safe and effective care for our patients.</li> </ul>	Minimal	↔ (same)
Financial Risk		<ul style="list-style-type: none"> <li>• <b>Financial management and waste reduction</b> We will deliver sound financial management and reporting for the Trust with no material misstatements or variances to forecast.</li> </ul>	Cautious	↔ (same)
External Risk		<ul style="list-style-type: none"> <li>• <b>Regulatory risk</b> We will comply with or exceed all regulations, retain its CQC registration and always operate within the law.</li> </ul>	Averse	↔ (same)

<b>Key points</b>	
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"> <li>(i) consider, challenge and confirm the correct strategy has been adopted to ensure potentially significant risks are kept under prudent control</li> <li>(ii) consider and approve the changes to significant risks following the meetings of the Risk Management Committees held on 2 December 2021 and 6 January 2022</li> <li>(iii) advise on any further risk treatment required.</li> </ul>	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 (2 December 2021 and 6 January 2022) 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:

### Workforce Risk

- **Workforce Supply:** nurse staffing levels and medical staffing including doctors in training
- **Workforce Deployment:** Leeds vaccination programme

### Operational Risk

- **Business Continuity:** viral pandemic and power failure/lack of IPS/UPS resilience due to the electrical infrastructure.
- **Health & Safety:** harm due to clinically related behaviours that challenge linked to organic, mental health or other reasons and staff health, safety and wellbeing during the COVID-19 pandemic.
- **Information Technology:** - None at present
- **Change:** 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 and LGI Site development project.

### Clinical Risk

- **Infection Prevention & Control:** healthcare acquired infection.
- **Patient Safety & Outcomes:** re-commencing normal activity levels due to reduced capacity (COVID-19), patient harm related to falls and hospital acquired pressure ulcers (COVID-19), achieving the Emergency Care Standard, 18-week RTT target, 62-day cancer target, 28-day cancelled operation target, patients waiting 52-week+ in spinal injuries and colorectal services and patients waiting longer than 6 weeks following referral for diagnostics tests.
- **Capacity Planning:** patient flow and capacity for emergency admissions and levels of medical outliers.

### Financial Risk

- **Financial Management & Waste Reduction:** delivery of financial targets in 2021/22 and impact on capital resources.

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 December 2021 Risk Management Committee**

**CRRW3 - Delivering (COVID-19) Vaccination programme**

This corporate risk had been reviewed by the General Manager for the Leeds COVID Vaccination Programme to reflect the risk description, controls and further mitigating actions in response to the delivery of the West Yorkshire Vaccination programme. There was no proposed change to the risk score of 16.

**CRRO3 - Harm due to clinically related behaviours that challenge linked to organic, mental health or other reasons**

This corporate risk had been reviewed by the Deputy Chief Nurse in conjunction with the Head of Mental Health Legislation, to reflect the risk description, controls and further mitigating actions, including an update on the face-to-face de-escalation training, which had been commissioned from GoodSense. The Corporate Nursing Team had also developed the nursing training needs analysis (TNA), which included core skills relating mental health. There was no proposed change to the risk score of 16.

**CRRO4 - Staff health, safety and wellbeing during the COVID-19 pandemic**

This corporate risk was developed, guided by the national publication Working Safely during Covid-19 and has been reviewed. The corporate risk has been revised to focus on staff health, safety and wellbeing. There was no proposed change to the risk score of 20.

The following seven corporate risks were reviewed and updated by the Chief Operating Officer in conjunction with the Corporate Operations Team, in line with the Constitutional standards, with an update of controls and further mitigating actions.

**CRRC2 - Risk of re-commencing normal activity levels due to reduced capacity (COVID-19)**

A number of controls and mitigating actions have been migrated to some of the other risks summarised below, following review at the Service Delivery meeting on 23 November 2021. There was no proposed change to the risk score of 20.

**CRRC4 - Failure to achieve Emergency Care Standard**

Following review of controls and further mitigating actions by the Corporate Operations Team there was no proposed change to the risk score of 20.

**CRRC5 - 18-week RTT target non-compliance**

An update on the additional medical payments agreed to support additional activity specifically for treatment of long waiting patients was added to this risk. There was no proposed change to the risk score of 20.

**CRRC6 - 62-day cancer target**

An update was included setting out the actions that were being taken to review and prioritise patients for treatment. There was no proposed change to the risk score of 16.

**CRRC8 - 52-week RTT target non-compliance in spinal injuries and colorectal services**

An update was included on the plans to agree an on-going review process by clinical teams and a new process has now been established for adding the 'P category' to the patient's record at the time of decision to admit and the diagnostics code at time of test request. The risk description was also updated to reflect the risk related to patients waiting > 104 weeks, following discussion at the Committee in November. There was no proposed change to the risk score of 20.

**CRRC10 - Patient flow and capacity for emergency admissions (health economy)**

The review of this risk included an update on the expansion of Villa Care (L12). There was no proposed change to the risk score of 20.

**Risks reviewed at the January 2022 Risk Management Committee**

**CRRW3 - Delivery of the Leeds & West Yorkshire Vaccination programme**

This corporate risk had been reviewed by the Chief Medical Officer in conjunction with the Director of Quality and Associate Director of Operations to reflect the risk description, controls and further mitigating actions in response to the delivery of the West Yorkshire Vaccination programme. It was recommended that the delivery of the vaccination programme was moved away from the responsibility of acute healthcare staff into the community, this would require further discussion with partners across the city. This risk would be further updated for review at the Committee in February to reflect the medium to long term plan. There was no proposed change to the risk score of 16.

**CRRO2 - Power failure/lack of IPS/UPS resilience due to electrical infrastructure**

This corporate risk had been reviewed by the Director of Estates and Facilities in conjunction with the Head of Estates, Compliance & Risk, with an update of controls and further mitigating actions, including an update on plans to install IPS on ward J54 in December 2021 when access was available. There was no proposed change to the risk score of 16.

**CRRO4 - Staff health, safety and wellbeing during the COVID-19 pandemic**

The corporate risk has been revised to focus on staff health, safety and wellbeing. The Committee noted that the new law related to vaccination for those healthcare staff involved in CQC regulated activities in patient facing roles took effect from 6 January 2022. The Committee were advised that a process had been established to identify staff who worked in patient facing roles i.e. were in scope, who had declared that they did not wish to take up the offer of vaccination. This continued to be discussed in conjunction with staff side and others, this remained a significant risk. There was no proposed change to the risk score of 20.

**CRRO6 - Risk relating to commercial pressures arising from delays in delivering the refurbishment of the Generating Station Complex (GSC) at LGI**

This corporate risk had been reviewed by the Director of Estates and Facilities, with an update of controls and further mitigating actions, including an update on the installation of the infrastructure, which was due to be completed in March/April 2022. The delaying factor related to the arrangements for testing. There was no proposed change to the risk score of 16.

**CRRC2 - Risk of re-commencing normal activity levels due to reduced capacity (COVID-19)**

This corporate risk had been reviewed by the Corporate Operations Team and it was confirmed that there were no further amendments to the controls and further mitigating actions. The Committee acknowledged that this remained a significant risk, noting the rapidly escalating situation as a consequence of the Omicron variant. There was no proposed change to the risk score of 20.

**CRRC4 - Failure to achieve Emergency Care Standard**

This corporate risk had been reviewed by the Corporate Operations Team and presented to the Risk Management Committee at the December 2021 meeting. There was a recommendation from the Finance and Performance Committee to increase the risk score from 20 to 25. This risk was considered by the Committee, noting that whilst the likelihood remained very significant (5), there were a range of mitigating actions in place to maintain patient safety and therefore the impact would remain 4. There was no proposed change to the risk score of 20.

**CRRC9 - Patients waiting longer than 6 weeks following referral for diagnostics tests**

This corporate risk had been updated by the Corporate Operations Team, with an update of controls and further mitigating actions, including an update on the use of independent sector/ AQPs for CT, MRI and ultrasound and additional staffed mobile CT was being progressed. There was no proposed change to the risk score of 16.

**Proposed new Corporate Risks**

There was one new proposed corporate risk that was reviewed and supported by the Committee

**Airedale hospital (infrastructure)**

This potential risk was discussed at the Committee in November and December 2021 and it was recommended that the risk was reviewed following the table top exercise with partners in December. It was acknowledged that the likelihood of the risk materialising and the impact remained unknown. The Committee agreed an initial risk score of 16 (likelihood 4, impact 4) and supported the proposal to add this to the corporate risk register, with a recommendation to review the risk description to describe the specific risks to LTHT.

**Horizon scan - New risks**

There was one new emerging risk considered by the Committee.

**Nightingale Surge Hub**

The Committee discussed the emerging risk relating to the establishment of a Nightingale surge hub at the St James's location and it was agreed that the risk would be developed as a potential corporate risk with a view to review it at Risk management Committee in February. It was acknowledged that the specific risks were not fully known at present, however a very significant risk would relate to the provision of sufficient numbers of staff to manage the additional capacity should this be needed.

**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 December and January 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**  
**January 2022**