



PUBLIC BOARD
Corporate Risk Register

28 September 2023

Presented for:	Assurance
Presented by:	Professor Phil Wood, Chief Executive Hamish McLure, Chief Medical Officer Simon Worthington, Director of Finance Helen Christodoulides, Interim 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 3 August 2023 and 7 September 2023

Our Annual Commitments for 2023/24 are:	
Effectively develop and deploy new assets (buildings, equipment, IT)	✓
Reduce healthcare associated infections	✓
Improve staff retention	✓
Deliver the financial plan	✓
Reduce average length of stay by 0.5 days per patient	
Achieve the Access Targets for Patients	✓
Support a culture of research	✓

Trust Risks (Type & Category)				
Level 1 Risk	(✓)	Level 2 Risks	(Risk Appetite Scale)	Risk
Workforce Risk		<ul style="list-style-type: none"> Workforce supply 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. 	Cautious	↔ (same)
Operational		<ul style="list-style-type: none"> Business continuity 	Cautious	↔ (same)

Risk		We will develop and maintain stable and resilient services, operating to consistently high levels of performance.		
Clinical Risk		<ul style="list-style-type: none"> • Capacity planning 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. • Infection prevention and control We will manage the risks related to infection prevention and control to reduce the transmission of infection in our hospitals. • Patient safety and outcomes 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. 	Minimal	↔ (same)
Financial Risk		<ul style="list-style-type: none"> • Financial management and waste reduction We will deliver sound financial management and reporting for the Trust with no material misstatements or variances to forecast. 	Cautious	↔ (same)
External Risk		<ul style="list-style-type: none"> • Regulatory risk We will comply with or exceed all regulations, retain its CQC registration and always operate within the law. 	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 3 August 2023 and 7 September 2023 (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 (3 August 2023 and 7 September 2023) 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:** Combined workforce risk
- **Workforce Deployment:** (No active risks under this category)

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.
- **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.
- **Information Technology:** cyber attack leading to potential loss of IT systems and/or data and insufficient DIT resources to meet demand for DIT led projects.

Clinical Risk

- **Infection Prevention & Control:** healthcare acquired infection.
- **Patient Safety & Outcomes:** 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-and 78 weeks for treatment across a range of services and patients waiting longer than 6 weeks following referral for diagnostics tests.
- **Capacity Planning:** patient flow and capacity for emergency admissions and Airedale Hospital infrastructure potential risk re transferring patients to LTHT.

Financial Risk

- **Financial Management & Waste Reduction:** delivery of financial targets in 2023/24 and impact on capital resources and reduction in operational capital allocation .

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

The Committee considered the context for reviewing the risks at the meetings 3 August 2023 and 7 September 2023, noting the sustained operational pressures and the

impact on the urgent and emergency care pathways, and the delivery of planned (elective) care, including the level of risk as a consequence of this. This affected a range of established risks, these were considered in relation to the impact on patient safety, outcomes and experience and the health and wellbeing of staff who were required to provide care in a very challenging operating environment. The Committee sought assurance on the actions that were being taken in conjunction with operational teams and corporate departments to mitigate those risks discussed at the meetings in August 2023 and September 2023.

Risks reviewed at the August 2023 Risk Management Committee

CRRC3 - Patient harm – falls and hospital acquired pressure ulcers.

This corporate risk had been updated by the Deputy Chief Nurse, with an update of controls and further mitigating actions, including an update on the Working group established to review the enhanced care procedure and the aim was to complete it by January 2024. There was no proposed change to the risk score of 16.

CRRF2 – Reduction in operational capital allocation.

This corporate risk had been reviewed by the Director of Strategy, noting that there had been some changes proposed to the ICB capital allocation following recent discussions, which may result in the top slicing of capital across local systems, which would have an impact on the risk score, controls and mitigating actions. This was currently being reviewed and it was proposed that this Corporate Risk would be reviewed and presented to Risk Management Committee at the next meeting in September.

CRR012 – Closure of data centre in December 2023.

The Chief Digital & Information Officer confirmed that following a comprehensive audit the risk had been fully scoped, with an action plan that was currently being implemented. As a result, the risk had been re-assessed. It was recommended that the risk score would be reduced, and this risk would be removed from the Corporate Risk Register with oversight provided by DIT. This was agreed by the Committee.

Risks reviewed at the September 2023 Risk Management Committee

CRRO11 - Insufficient DIT resources to meet demand for DIT led projects.

This corporate risk had been reviewed by the Chief Digital and Information Officer, and it was confirmed that there were no further amendments to the controls and further mitigating actions. There was no proposed change to the risk score of 15.

CRRC5 - 18-week RTT target non-compliance.

This corporate risk had been reviewed by the Corporate Operations Team, with an update of controls and further mitigating actions, including CSUs prioritising access to the Independent Sector to support specialities. There was no proposed change to the risk score of 20.

CRRC7 - Failure to achieve 28 day cancelled operations target.

This corporate risk had been reviewed by the Corporate Operations Team, with an update of controls and further mitigating actions, including Service Delivery Framework and Integrated Accountability Meetings used to support the daily management of CSU KPIs and delivery of the 28 day standard. There was no proposed change to the risk score of 16.

CRRC10 - High occupancy levels and insufficient capacity and flow across the health and Social care system causing impact on elective activity, unplanned care and diagnostic ability to meet the needs of our patients.

This corporate risk had been reviewed by the Corporate Operations Team, with an update of controls and further mitigating actions, including an update on the external audit of length of stay analysis commissioned and completed in August 2023. Key findings were identified and an action plan was in development. There was no proposed change to the risk score of 16.

CRRF2 - Reduction in operational capital allocation.

This corporate risk had been reviewed by the Director of Strategy, with an update of controls and further mitigating actions, including risks to the Trust in the event that a top slice approach was taken and briefing provided to ICB Director of Finance. This was supported by the Committee.

Proposed New Corporate Risks

August and September 2023 Meeting

There were no new proposed corporate risks identified by the Committee.

Horizon Scan - New Risks

At the August 2023 meeting there were no new risks identified by the Committee.

At the September 2023 meeting the Committee considered emerging risks, including the risk related to Reinforced Autoclaved Aerated Concrete (RAAC) that was covered in the emergency preparedness report and were assured by the actions that were being taken locally and in conjunction with partner organisations. It was noted that the corporate risk CRRC12 would be reviewed at Risk Management Committee in November 2023, which would provide opportunity to provide an update following the repeat survey. The Committee also considered the impact of the recent trial regarding the nurse who was convicted of murder working in a neonatal unit. HC briefed the Committee on the national meeting that was led by NHSE on 6 September 2023, to share the key learning and messages that were arising from the trial. This focused on culture of organisations, speaking up and patient safety.

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 August and September 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
September 2023