

Corporate Risk Register

Trust Board Meeting	Item: 9.2
26th March 2014	Enclosure: K
Purpose of the Report: To update the Board on the contents of the Corporate Risk Register as it stands at 25 th March 2014.	
FOR: Information <input type="checkbox"/> Assurance <input type="checkbox"/> Discussion and input <input checked="" type="checkbox"/> Decision/approval <input checked="" type="checkbox"/>	
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Risk Implications – Link to Assurance Framework or Corporate Risk Register:	Risks on the Corporate Risk Register are mapped to the BAF
Legal / Regulatory / Reputation Implications:	Outlines risks to statutory compliances and Indicates any areas of statutory non-compliance
Link to Relevant Corporate Objective:	Identified on the Register
Document Previously Considered By:	Compliance and Risk Committee Working Group Compliance and Risk Committee
Recommendation& Action required by the Trust Board : Consider the contents of the Corporate Risk Register as it stands at 25 th March 2014, and confirm that the register provides assurance that appropriate action is being taken and that there is appropriate identification of key risks	

RISK REGISTER REPORT

Corporate Risk Register

1. The Corporate Risk Register is regularly reviewed and updated to ensure robust capture of strategic risks, as well as operational risks. It is reviewed monthly at the Compliance and Risk Committee and the Compliance and Risk Working Group. The Clinical Quality Improvement Committee will maintain an oversight of the quality risks. The quality risks are reviewed at the Quality Assurance Committee (bi-monthly), with the whole risk register being reviewed at the Audit Committee.
2. The Corporate Risk Register (appendix 1) is presented to the Trust Board quarterly and was last presented in November 2013. Appendix 2 provides an overview of the Risk Register on one page.
3. The Corporate Risk Register reflects all those risks with a current score of 8 or above contained in the Board Assurance Framework, the Integrated Business Plan (IBP), Corporate Departments and Service Line Risk Registers, as well as those risks identified by the Executive Team and Risk sub committees.
4. The Corporate Risk Register records the actions planned to mitigate each risk and progress in achieving these. It supports a 'bottom up, top down' approach to the treatment of significant risks.

Key points

5. Before any Service Line risk is escalated to, or de-escalated from, the Corporate Risk Register, the escalation/de-escalation is approved by the Service Line Performance Review Meeting and agreed by the Compliance and Risk Committee.
6. Where new or existing risks have been identified within a Service Line that relate to a risk already recorded on the Corporate Risk Register these are not duplicated, but referenced in the Corporate Risk's description, for example risk reference T021, encompasses the various risks identified within Service Lines with regard to incomplete or unavailable health records, the reference numbers of the supporting risks are noted in the description.
7. To help the Board understand the risk scoring parameters the full risk matrix has been included in this report at appendix 3.

Areas of movement in the Corporate Risk Register since November 2013

8. There are two risks (shown below) on the Corporate Risk Register where, since it was last presented to the Board in November 2013 the current risk score changed as a result of reassessment.

Service Line	Ref	Risk Description	Comments	Previous Score	New Score
Corporate Services	T_IMT010	CRS UPGRADE – PLANNING – deployment might highlight issues with existing processes. Mapping from existing processes to the “to be” state may expose problems.	The risk was reviewed and the likelihood reduced due to the effectiveness of the actions being implanted.	12	8

Service Line	Ref	Risk Description	Comments	Previous Score	New Score
Corporate	T029	Substantial Financial Penalties and risk to monitor governance risk rating as a result of exceeding the national trajectory for C.Diff. (£40,000 for every case over the 2013/14 trajectory of 15)	The risk has been reduced because reinvestment to the current level of penalties has been agreed by the Commissioners.	15	6

9. Seven risks (shown below) have been escalated to the Corporate Risk Register either from Service Line Risk Registers (where risks have scored as 8 and above) or newly identified corporate risks.

Division	Service Line	Ref	Description	Score
Corporate		T037	Implementation of the 'Better Care Fund' agenda results in a significant net financial deficit to the Trust and/or inability to meet quality targets e.g. waiting times	16
Corporate Services	Estates	T_EST008	Esher Wing windows are distorted and overall are beyond their useful life. This materially affects the environment for patients in the wards in winter.	12
Corporate Services	Estates	T040	Risks identified from the Frankham Consultancy Business Critical Review and the development of the Estates Strategy regarding the failure of engineering systems and buildings which are beyond their useful life may be realised	12
Corporate Services	Estates	T_EST023	Incorrect segregation of waste remains an issue which creates a high financial risk for the Trust and also a risk of prosecution. Training in key areas underway	9
Corporate Services	Estates	T_EST026	Increased Energy Prices - Volatile Energy Prices. At present estates energy budget is 2.5million. The price increase has the potential to have a large financial impact.	8
Clinical Support Services	Radiology	T_RAD006	Risk of inability to provide a service to patients due to the inability to recruit sonographers and a cost pressure when recruiting agency staff'	8
Emergency Services	Trauma & Orthopaedics	T_TO015	Delay in scheduling patients for surgery or outpatient appointments, resulting in potential delay in failure to meet the 18 week referral to treatment standards	9

10. Ten risks have been re-assessed and rescored at below 8 and therefore have been de-escalated from the Corporate Risk Register, these are:

Division	Service Line	Ref	Description	Comment
Specialist Services	Gynae & Breast	T_WCH_GYN003	Limited capacity on Isabella ward for Gynae patients	The risk was reviewed and closed as Isabella and

			impacting significantly on patient experience. Patients being placed in inappropriate locations, delays in getting patients to theatre impacting on elective activity. Patients staying in recovery for protracted periods.	Jasmine Units were relocated to a newly refurbished ward and there is now sufficient capacity for patients.
Corporate Services	IM&T	T_IMT009	Risk that the Trust will incur significant additional costs as a result of failure to complete the procurement of and transition to a replacement PAS/EPR system when the national contract comes to an end in Oct 2015	The risk was reviewed and the score reduced to 5 as the plan is on track and is highly effective and proximity of risk is in October 2015. Delay has no impact on overall timescales (exit targeted for April 2015).
Corporate Services	IM&T	T_IMT013	CRS UPGRADE - USER - Staff do not consistently comply with using the system.	The risk was reassessed and scored as 4 as the mitigations in place are effective.
Corporate Services	IM&T	T_IMT014	CRS UPGRADE - REPORTING - statutory reporting does not work, mandatory data returns not available, or incorrect/incomplete. Operational services are impacted by not having performance data or 18week pathways are affected.	The risk was reassessed and reduced to 4 as the mitigations continue to be effective. The low residual risk will be tolerated.
Emergency Services	Elderly Care	T_MAE_A M007	Lack of provision of psychogeriatric inreach to review and advice on behaviourally challenged elderly (largely due to consequences of dementia and delirium). This results in patients not being managed on the appropriate clinical pathway	The risk has been reduced to 6 as the mitigating actions have been implemented and are effective. The risk is considered to be no longer relevant.
Emergency Services	Elderly Care	T_MAE_A M008	Risk of not having enough staff and appropriate skill mix to deliver high quality care.	After a successful recruitment campaign the risk was reassessed and reduced to 6. A daily review of staffing levels is in place.
Emergency Services	Elderly Care	T_MAE_A M013	Risk of patients developing Stage 2-4 pressure ulcers whilst in hospital	Implementation of actions arising from SI investigations and continuous monitoring through ward score cards meant this risk was reduced to 6.
Emergency	Elderly	T_MAE_A	Risk of non-compliance with	The risk was reassessed

Services	Care	M017	ward standards, as detailed in the ward scorecard, arising from ineffective (Nursing) ward leadership adversely effective patient safety.	and reduced to 6 due to a detailed action plan in place with weekly reviews by the CEO and DoN.
Emergency Services	Elderly Care	T_MAE_A M021	Risk of not being able to provide staff to support to those patients requiring help to eat and drink at meal times and to optimise their nutritional intake.	The risk was reduced to 6 because the recruitment campaign was successful and actions have been implemented. Improved support from volunteers.
Emergency Services	Cardiology & Haematology	T_MAE004	Failure to escalate abnormal observations resulting in poor clinical outcome.	Increased staffing and observations have reduced the risk to 6 due to the effective mitigations. Continued to monitor at Service Line level.

Management, reviewing and reporting of the Corporate Risk Register

11. The following eleven risks require a review by the end of March 2014; these reviews have commenced and will be reflected in the next review of the Corporate Risk Register at the Compliance and Risk Committee in April 2014.

Division	Service Line	Ref	Description	Score
Corporate		T002	Failure to deliver the Trusts long term productivity programme	12
Corporate		T027	Impact of Winter pressures on Trust ability to maintain operational performance during winter months	12
Corporate		T036	Risk to the Trust's reputation if the Friends & Family Test inpatient scores remain nationally in the bottom quartile.	12
Corporate		T005	Failure to release sufficient costs as activity shifts to the community, resulting in an overall cost to the health economy	9
Corporate		T007	Failure to win tenders for secondary care input at outreach locations.	9
Corporate		T008	Competition from other providers affects the Trust's income position and financial viability	9
Corporate		T006	Failure of QIPP Action plan to achieve the reduction in volumes expected by GPs and PCTs resulting in financial tensions in the local health economy This risk is defined to relate to 2013/14 primarily	9
Corporate		T028	The failure to control the occurrence of C.Diff resulting in poor outcomes and experience for our patients	8
Clinical Support Services	Radiology	T_RAD006	Risk of inability to provide the required ultrasound service to patients due to difficulty in recruiting sonographers and a cost pressure when using agency staff.	8

Division	Service Line	Ref	Description	Score
Corporate Services	Information Governance	T_IG005	Risk of ICO fines through data breaches e.g. handover sheets not being properly disposed of, emails being sent to incorrect destinations	12
Corporate Services	Human Resources	T_HR009	Risk that the Trust will be unable to deliver the cultural change necessary to support change and that staff do not feel able to influence decisions about delivery of services.	9

12. The table below shows the timetable for the review of the Corporate Risk Register.

Meeting/Committee	Last reviewed	Next reviewing
Compliance & Risk Working Group	March 2014	April 2014
Compliance & Risk Committee	March 2014	April 2014
Quality Assurance Committee (Quality Risks only)	March 2014	May 2014
Audit Committee (Full CRR but with main focus on Financial, Strategic and Health & Safety Risks)	March 2013	June 2014
Trust Board	November 2013	March 2014

Development of Service Line Risk Registers

13. Risk registers have been created for each of the service lines. Work has taken place to transfer risks to them from the old Divisional Risk Registers. Risks reassessed as no longer accurate or relevant in the new structure have been archived.
14. Service Line Risk Registers and local risk management processes are reviewed by the Compliance & Risk Working Group ahead of them being scrutinised and ratified by the Compliance & Risk Committee; this supports the Service Line accreditation process.
15. An additional exercise is currently underway for each of the Service Line Risk Registers to be reviewed and assessed for the completeness and quality of content. This is an extra mechanism to gain assurance of the new process in place.
16. The Compliance & Risk Committee will be discussing this process with the Executive Management Committee in order to engender more traction in some areas.
17. The Corporate Risk Register will continue to be presented to the Compliance & Risk Committee every month.

Recommendations:

18. The Trust Board is asked to:
- 1) Consider the contents of the Corporate Risk Register as it stands at 25th March 2014, and confirm that the register provides assurance that appropriate action is being taken and that there is appropriate identification of key risks.

Corporate Risk Register - risks on 1 page
Mar 2014.

Key: ↑=increased risk ↓=decreased risk N=new risk NL=new risk linked

Clinical Support Services
Corporate
Corporate Services
Specialist Services
Emergency Services

Consequence	5							
	4	<div style="border:1px solid orange; padding:2px; width: 40px;">Poor pt outcomes / exp due to C.diff T028</div> <div style="border:1px solid blue; padding:2px; width: 40px;">Bed capacity constraints within ICU T_SCC_TCS007</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Failure to meet Monitor requirements. T031</div> <div style="border:1px solid blue; padding:2px; width: 40px;">Elec infrastructre T_E004</div> <div style="border:1px solid blue; padding:2px; width: 40px;">Legionella T_E005</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Cluster reconfig T003</div> <div style="border:1px solid blue; padding:2px; width: 40px;">CRS UPGRADE - PLANNING. T_IMT010 ↓</div>	<div style="border:1px solid orange; padding:2px; width: 40px;">SLM- Reduction in control T032</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Lack of org capacity T009</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Esher Wing windows T_EST008 N</div> <div style="border:1px solid blue; padding:2px; width: 40px;">Risk of ICO fines T_IG005</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Prod. Plan T002</div> <div style="border:1px solid purple; padding:2px; width: 40px;">Falls MAE003</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Out of Hours risk T018</div>	<div style="border:1px solid orange; padding:2px; width: 40px;">Better Care Fund Risk T037 N</div>				
	3		<div style="border:1px solid purple; padding:2px; width: 40px;">Not able to provide adequate acute capacity T_MAE_AM016</div> <div style="border:1px solid blue; padding:2px; width: 40px;">Statutory fire compliance EST002</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Failure to win tenders T007</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Competition T008</div> <div style="border:1px solid orange; padding:2px; width: 40px;">SLM-Lack of staff skills T033</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Frankham review risks T040 N</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Waste Management T_EST023 N</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Scheduling patients T_TO015 N</div> <div style="border:1px solid blue; padding:2px; width: 40px;">Reported delays in triage & treatment in paed A&E. T_WCH_PAE003</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Cultural change T_HR009</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Partnerships do not deliver T012</div> <div style="border:1px solid orange; padding:2px; width: 40px;">QIPP failure T006</div> <div style="border:1px solid orange; padding:2px; width: 40px;">CIP effect on quality T016</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Health records T021</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Shifts to community T005</div> <div style="border:1px solid blue; padding:2px; width: 40px;">Financial impact- new maternity tariff T_WCH_MAT01</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Lack of progress in SWL SAP plan impacting on staffing in Pathology. T_AC_PAT019</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Mand training compliance T025</div>	<div style="border:1px solid orange; padding:2px; width: 40px;">Reputation-FFT T036</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Winter pressure T027</div>				
	2			<div style="border:1px solid orange; padding:2px; width: 40px;">SLM- Interrelationships (T035)</div> <div style="border:1px solid orange; padding:2px; width: 40px;">Sonographer recruitment RAD006 N</div> <div style="border:1px solid blue; padding:2px; width: 40px;">Energy Prices T_EST026 N</div>				
	1							
	1	2	3	4	5			
	Likelihood							

Risk Grading/rating

The grading of risk is dependent on 2 factors; the **severity/Consequences** of the hazard and the **likelihood** the hazard will occur.

Table 1 Consequence/Severity scores

Choose the most appropriate domain for the identified risk from the left hand side of the table, then work along the columns in same row to assess the severity of the risk on the scale of 1 to 5 to determine the consequence score, which is the number given at the top of the column.

	Consequence score (severity levels) and examples of descriptors				
	1	2	3	4	5
Domains	Negligible	Minor	Moderate	Major	Catastrophic
Impact on the safety of patients, staff or public (physical/psychological harm)	<ul style="list-style-type: none"> Minimal injury requiring no/minimal intervention or treatment. No time off work 	<ul style="list-style-type: none"> Minor injury or illness, requiring minor intervention Requiring time off work for >3 days Increase in length of hospital stay by 1-3 days 	<ul style="list-style-type: none"> Moderate injury requiring professional intervention Requiring time off work for 4-14 days Increase in length of hospital stay by 4-15 days RIDDOR/agency reportable incident An event which impacts on a small number of patients 	<ul style="list-style-type: none"> Major injury leading to long-term incapacity/disability Requiring time off work for >14 days Increase in length of hospital stay by >15 days Mismanagement of patient care with long-term effects 	<ul style="list-style-type: none"> Incident leading to death Multiple permanent injuries or irreversible health effects An event which impacts on a large number of patients
Quality/complaints/audit	<ul style="list-style-type: none"> Peripheral element of treatment or service suboptimal Informal complaint/inquiry 	<ul style="list-style-type: none"> Overall treatment or service suboptimal Formal complaint (stage 1) Local resolution Single failure to meet internal standards Minor implications for patient safety if unresolved Reduced performance rating if unresolved 	<ul style="list-style-type: none"> Treatment or service has significantly reduced effectiveness Formal complaint (stage 2) complaint Local resolution (with potential to go to independent review) Repeated failure to meet internal standards Major patient safety implications if findings are not acted on 	<ul style="list-style-type: none"> Non-compliance with national standards with significant risk to patients if unresolved Multiple complaints/independent review Low performance rating Critical report 	<ul style="list-style-type: none"> Totally unacceptable level or quality of treatment/service Gross failure of patient safety if findings not acted on Inquest/ombudsman inquiry Gross failure to meet national standards

Human resources/ organisational development/staffing/ competence	Short-term low staffing level that temporarily reduces service quality (< 1 day)	<ul style="list-style-type: none"> Low staffing level that reduces the service quality 	<ul style="list-style-type: none"> Late delivery of key objective/ service due to lack of staff Unsafe staffing level or competence (>1 day) Low staff morale Poor staff attendance for mandatory/key training 	<ul style="list-style-type: none"> Uncertain delivery of key objective/service due to lack of staff Unsafe staffing level or competence (>5 days) Loss of key staff Very low staff morale No staff attending mandatory/ key training 	<ul style="list-style-type: none"> Non-delivery of key objective/service due to lack of staff Ongoing unsafe staffing levels or competence Loss of several key staff No staff attending mandatory training /key training on an ongoing basis
Statutory duty/ inspections	No or minimal impact or breach of guidance/ statutory duty	<ul style="list-style-type: none"> Breach of statutory legislation Reduced performance rating if unresolved 	<ul style="list-style-type: none"> Single breach in statutory duty Challenging external recommendations/ improvement notice 	<ul style="list-style-type: none"> Enforcement action Multiple breaches in statutory duty Improvement notices Low performance rating Critical report 	<ul style="list-style-type: none"> Multiple breaches in statutory duty Prosecution Complete systems change required Zero performance rating Severely critical report
Adverse publicity/ reputation	Rumours Potential for public concern	<ul style="list-style-type: none"> Local media coverage – short-term reduction in public confidence Elements of public expectation not being met 	<ul style="list-style-type: none"> Local media coverage – long-term reduction in public confidence 	<ul style="list-style-type: none"> National media coverage with <3 days service well below reasonable public expectation 	<ul style="list-style-type: none"> National media coverage with >3 days service well below reasonable public expectation. MP concerned (questions in the House) Total loss of public confidence
Business objectives/ projects	Insignificant cost increase/ schedule slippage	<ul style="list-style-type: none"> <5 per cent over project budget Schedule slippage 	<ul style="list-style-type: none"> 5–10 per cent over project budget Schedule slippage 	<ul style="list-style-type: none"> Non-compliance with national 10–25 per cent over project budget Schedule slippage Key objectives not met 	<ul style="list-style-type: none"> Incident leading >25 per cent over project budget Schedule slippage Key objectives not met
Finance including claims	Small loss Risk of claim remote	<ul style="list-style-type: none"> Loss of 0.1–0.25 per cent of budget Claim less than £10,000 	<ul style="list-style-type: none"> Loss of 0.25–0.5 per cent of budget Claim(s) between £10,000 and £100,000 	<ul style="list-style-type: none"> Uncertain delivery of key objective/Loss of 0.5–1.0 per cent of budget Claim(s) between £100,000 and £1 million Purchasers failing to pay on time 	<ul style="list-style-type: none"> Non-delivery of key objective/ Loss of >1 per cent of budget Failure to meet specification/ slippage Loss of contract / payment by results Claim(s) >£1 million

Service/business interruption Environmental impact	Loss/interruption of >1 hour Minimal or no impact on the environment	<ul style="list-style-type: none"> • Loss/interruption of >8 hours • Minor impact on environment 	<ul style="list-style-type: none"> • Loss/interruption of >1 day • Moderate impact on environment 	<ul style="list-style-type: none"> • Loss/interruption of >1 week • Major impact on environment 	<ul style="list-style-type: none"> • Permanent loss of service or facility • Catastrophic impact on environment
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Likelihood score (L)

What is the likelihood of the consequence occurring?

The frequency-based score is appropriate in most circumstances and is easier to identify. It should be used whenever it is possible to identify a frequency.

Likelihood score	1	2	3	4	5
Descriptor	Rare	Unlikely	Possible	Likely	Almost certain
Frequency How often might it/does it happen	This will probably never happen/recur	Do not expect it to happen/recur but it is possible it may do so	Might happen or recur occasionally	Will probably happen/recur but it is not a persisting issue	Will undoubtedly happen/recur, possibly frequently

Table 3 Risk scoring = consequence x likelihood (C x L)

		Likelihood				
		1	2	3	4	5
Consequence		Rare	Unlikely	Possible	Likely	Almost certain
5	Catastrophic	5	10	15	20	25
4	Major	4	8	12	16	20
3	Moderate	3	6	9	12	15
2	Minor	2	4	6	8	10
1	Negligible	1	2	3	4	5

For grading risk, the scores obtained from the risk matrix are assigned grades as follows

	1 - 3	Low risk
	4 - 6	Moderate risk
	8 - 12	High risk
	15 - 25	Extreme risk