

Public Trust Board – 27 April 2021

Organisational Risk Register

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.

Purpose of the report

This report provides assurance that risk is being managed effectively.

Analysis of the issue

Overall, there are 28 risks on the ORR.

April 2021 Review

There are a number of key changes this month, following a review of the covid ORR risks at the April Covid Executive Group and Strategic Executive Board (SEB), and a deep dive executive led review of waiting times risk, and system risk relating to the Integrated Care System.

- A full review of the two waiting times related risks (28 and 44) was undertaken with the Medical Director and Operational Directors. A decision was made to combine the risks into the original risk 28 rather than hold a separate covid related risk. The covid impact on access has been fully captured within the updated ORR risk 28.
- Our overarching covid risk (40) 'the ability of the Trust to deliver high quality care may be affected during a Coronavirus COVID-19 pandemic' has a strengthened process for review with the ICC. Any risks scoring 16+ within the ICC, where gaps in control are identified, are captured within risk 40. Whilst this risk will no longer be part of a weekly ICC Flash Report, the risk is updated regularly and reviewed at the Covid Executive Group and SEB.
- A full review of the separate covid related risks was undertaken at the Covid Executive Group and the Strategic Executive Group. There has been a significant strengthening in controls for three of these risks (41, 42 and 43) and they are no longer a risk to our strategic objectives. Detail is provided below.

De-escalations / closures

Risk 41 The Trust may not appropriately manage the health and well-being of our BAME staff and staff with key protected characteristics given the disproportionate impact of COVID-19

A full review of this risk was undertaken at the 7 April 2021 Covid Executive Group. The risk score has reduced from 15 to 10 (in line with residual and appetite) and the one remaining action 'ensure review of Vaccine hesitancy for BAME staff embedded in ICC' was reviewed. The group confirmed that the ICC has robust oversight and we are therefore recommending the de-escalation of this risk which will transfer to the ICC risk register for local ongoing oversight and management.

Risk 42 The Trust may not appropriately manage its patients with LD and Autism given the known disproportionate adverse impact of COVID-19 on this patient group

A full review of this risk was undertaken at the 7 April 2021 Covid Executive Group. The Group confirmed that appropriate LD&A specialist support has been provided to the Covid 19

vaccination programme and specialist vaccination appointments have been in operation to target this cohort of patients. The risk score has reduced from 12 to 8 in line with the risk appetite and we are recommending the de-escalation of this risk which will transfer to the ICC risk register for local ongoing oversight and management.

Risk 43 The Trust response to COVID-19 may negatively impact on the safety and well-being of vulnerable patients detained under the Mental Health Act.

There are no identified gaps in control or assurance, and there are no further actions. We are proposing to de-escalate this risk, to be held on the ICC risk register for oversight and management with support by the Mental Health Act Office.

Risk 44 A post COVID-19 surge in referrals would have a detrimental impact on waiting times and patient harm if the Trust is unable to increase capacity.

As detailed above, the risk resulting from the impact of covid has been captured within risk 28 and we are recommending the closure of this risk 44.

Risk 16 The Leicester/Leicestershire / Rutland system is unable to work together to deliver an ICS.

Following the developments with the LLR ICS we are proposing to close this risk which had a focus on planning, to a new risk (55) as detailed below to capture new risk around participation in the ICS.

Escalations / Inclusions

Risk 55 The Leicester/Leicestershire / Rutland system does not deliver the transformation needed to deliver a successful ICS.

We are proposing the inclusion of this risk regarding the Trust's participation in the delivery of transformation under the LLR ICS.

Analysis

There are 13 risks with a high current score. Of these, nine are scoring 16, the highest risk score on the ORR.

Summary list of risks and scores April 2021

No.	Title	SU2G	Initial risk	Current risk	Residual Risk	Target (Appetite)
1	The Trust's clinical systems and processes may not consistently deliver harm free care.	High Standards	16	16	8	8
2	The Trust's safeguarding systems do not fully safeguard patients and support frontline staff and services.	High Standards	12	12	8	8
3	The Trust does not learn from incidents and events and does not effectively share that learning across the whole organisation.	High Standards	15	12	8	8
4	Services are unable to meet safe staffing requirements	High Standards	12	16	12	8
5	Capacity and capability to deliver regulator standards	High Standards	12	12	8	8
6	The step up to great mental health strategy does not deliver improved mental health services that meet quality, safety and contractual requirements and are sustainable.	Transformation	16	8	8	8
8	The transformation plan does not deliver improved outcomes for people with LD and/or autism.	Transformation	16	16	12	12
9	Inability to maintain the level of cleanliness required	Environment	12	12	8	8

	within the Hygiene Standards					
10	Failure to implement planned and reactive maintenance of the estate leading to an unacceptable environment for patients to be treated in	Environment	16	16	12	12
11	The current estate configuration does not allow for the delivery of high quality healthcare	Environment	20	16	12	12
16	<i>The Leicester/Leicestershire / Rutland system is unable to work together to deliver an ICS</i>	<i>Well Governed</i>	16	6	6	3
20	Performance management framework is not fit for purpose	Well Governed	20	8	4	4
24	Failure to deliver workforce equality, diversity and inclusion	Equality, Leadership, Culture	12	12	9	9
25	Staff do not fully engage and embrace the Trusts culture and collective leadership	Equality, Leadership and Culture	16	8	8	4
26	Insufficient staffing levels to meet capacity and demand and provide quality services	Equality, Leadership and Culture	16	16	12	12
27	The health and well-being of our staff is not maintained and improved	Equality, Leadership and Culture	9	9	6	6
28	<i>Delayed access to assessment and treatment impacts on patient safety and outcomes</i>	<i>Access to Services</i>	16	16	8	8
33	Insufficient executive capacity (including Shared Chief Executive role) to cover demand and impacts on LPT ability to achieve its strategic aims	Well Governed	16	12	8	8
35	The quality and availability of data reporting is not sufficiently mature to inform quality decision making	Well Governed	16	16	12	12
40	The ability of the Trust to deliver high quality care may be affected during a Coronavirus COVID-19 pandemic	High Standards	20	15	10	10
41	<i>The Trust may not appropriately manage the health and well-being of our BAME staff, and staff with key protected characteristics given the disproportionate impact of COVID-19</i>	<i>High Standards, Equality, Leadership and Culture</i>	15	10	10	10
42	<i>The Trust may not appropriately manage its patients with LD and Autism given the known disproportionate adverse impact of COVID-19 on this patient group</i>	<i>High Standards</i>	12	8	8	8
43	<i>The Trust response to COVID-19 may negatively impact on the safety and well-being of vulnerable patients detained under the Mental Health Act.</i>	<i>High Standards</i>	15	10	10	10
44	<i>A post COVID-19 surge in referrals would have a detrimental impact on waiting times and patient harm if the Trust is unable to increase capacity</i>	<i>Access to Services, High Standards</i>	16	16	12	12
48	We are unable to contain expenditure, or to recover income in line with the limits imposed by NHSEI under the COVID financial regime.	Well Governed	15	10	10	10
52	Without sufficient student placement capacity, the health and social care system will have a shortfall in the availability of a qualified workforce	High Standards, Equality, Leadership and Culture	20	15	10	10
54	We are unable to deliver the LPT 2021/22 financial plan, LPT operational plans or LLR system plans.	Well Governed	15	15	10	10
55	<i>The Leicester/Leicestershire / Rutland system does not deliver the transformation needed to deliver a successful ICS</i>	<i>Well Governed</i>	8		6	6

Summary trend of risk scores for all risks (rolling year) as at 17 April 2021

ORR	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21	Mar-21	Apr-21
1	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
2	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
3	16 ↔	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
4	12 ↔	12 ↔	12 ↔	12 ↔	12 ↓	12 ↔	12 ↔	12 ↔	16 ↑	16 ↔	16 ↔	16 ↔
5	16 ↑	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
6	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	8 ↓	8 ↔	8 ↔
7												
8	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
9	16 ↑	16 ↔	16 ↔	16 ↔	12 ↓	8 ↓	8 ↔	8 ↔	8 ↔	12 ↑	12 ↔	12 ↔
10	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
11	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
12	9 ↔	9 ↔	9 ↔	9 ↔	6 ↓	6 ↔						
13												
14												
15												
16	12 ↓	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	9 ↓	9 ↔	9 ↔	9 ↔	9 ↔	6 ↓
17												
18												
19												
20	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔
21												
22	16 ↑	12 ↓	12 ↔									
23	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	4 ↓	4 ↔			
24	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
25	16 ↔	12 ↓	12 ↔	12 ↔	8 ↓	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔	8 ↔
26	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
27	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔
28	20 ↔	20 ↔	20 ↔	16 ↓	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
29	8 ↓											
30												
31												
32												
33	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔
34												
35	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔	16 ↑	16 ↔	16 ↔
36												
37												
38	20 ↔	20 ↔										
39	16 ↑	16 ↔										
40	20 ↔	20 ↔	20 ↔	20 ↔	15 ↓	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔
41	15	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	10 ↓	10 ↔	10 ↔
42	12	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	12 ↔	8 ↓	8 ↓
43	15	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	10 ↓	10 ↔	10 ↔
44	16	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔	16 ↔
45	9	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	9 ↔	6 ↓			
46	16	16 ↔	16 ↔	16 ↔	12 ↓	12 ↔	12 ↔	12 ↔				
47	15	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔		
48		15	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	15 ↔	10 ↓	10 ↔	10 ↔	
49			16									
50			16	9 ↓	9 ↔	9 ↔	9 ↔					
51					20	20 ↔	20 ↔	20 ↔	10 ↓	10 ↔		
52						20	20 ↔	20 ↔	15 ↓	15 ↔	15 ↔	
53							20	15 ↓				
54									15	15 ↔	15 ↔	
55												8

Proposal

- On-going business rhythm of monthly ORR review and maintenance
- To continue to horizon scan
- In-depth review of Risk 33 'insufficient executive capacity (including Shared Chief Executive role) to cover demand and impacts on LPT ability to achieve its strategic aims' at the Strategic Executive Board 7 May 2021 following the recruitment exercise for a substantive Director of Community Health Services.

Decision required

- Approve the de-escalation of risks 41, 42 and 43
- Approve the closure of risks 16 and 44
- Approve the inclusion of Risk 55
- To confirm a level of assurance over the management of strategic risk on the ORR.

Governance table

For Board and Board Committees:	Public Trust Board	
Paper sponsored by:	Chris Oakes, Director of Governance and Risk	
Paper authored by:	Kate Dyer, Deputy Director of Governance and Risk	
Date submitted:	19 April 2021	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):	Regular ORR reports to level 1 Committees and the Trust Board. This February 2021 version has not been to any other forum.	
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 update report will be provided for the purposes of corporate Agenda planning	Each meeting	
STEP up to GREAT strategic alignment*:	High Standards	Yes
	Transformation	Yes
	Environments	Yes
	Patient Involvement	Yes
	Well Governed	Yes
	Single Patient Record	Yes
	Equality, Leadership, Culture	Yes
	Access to Services	Yes
	Trust wide Quality Improvement	Yes
Organisational Risk Register considerations:	List risk number and title of risk	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 of patients or the public	Confirmed	
Equality considerations:	None	