

Significant Risk Register

For: *Information and review*

Summary: *This report details the current significant risk register.
It highlights changes in risk scoring, reviews, new and closed risks.
In future all risks recorded on the BAF will be transferred to the risk register for comparison.
As part of an internal audit recommendation the significant risk register also includes those risks which are recorded at the highest consequence level but lower likelihood. This is because high severity, low likelihood risks are more significant to Trust activity than high likelihood, low consequence risks and ensures the board are regularly briefed on the management of significant concerns.
The Quarterly report has been run mid September, so details may change on future reports.*

Action: The Board is asked to: Review and seek assurance that all relevant risks are recoded

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Notes:

Trust objective:	Please list number and statement this paper relates to.
Legal:	What are the legal considerations and implications linked to this item? Please name relevant act <i>This specifically effects our legal requirement to monitor and manage risk</i>
Regulation:	What aspect of regulation applies and what are the outcome implications? This applies to <u>any</u> regulatory body – key regulators include: Care Quality Commission, MHRA, NPSA & Audit Commission <i>Specifically: Outcome 16 of the Care Quality Commission Essential Standards (effects all other outcomes)</i>

Significant Risk Register

Date	September 2012
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Audience	Trust Board Members

1.0 Introduction

This paper provides a supporting narrative for:

- The Trust risk profile report

It includes details of current risk ratings and reviews, closed risks and themes. It is planned that all risks recorded on the BAF will be transferred to the risk register and will in future be available in this report for comparison (At the time of writing there are no risks recorded on the BAF with a higher current rating than any risk recorded on the Trust risk register)

- The Trust wide significant risk register

The significant risk register is reviewed by the MBQR and more specifically by the Divisions who scrutinize their risk registers on a frequent basis.

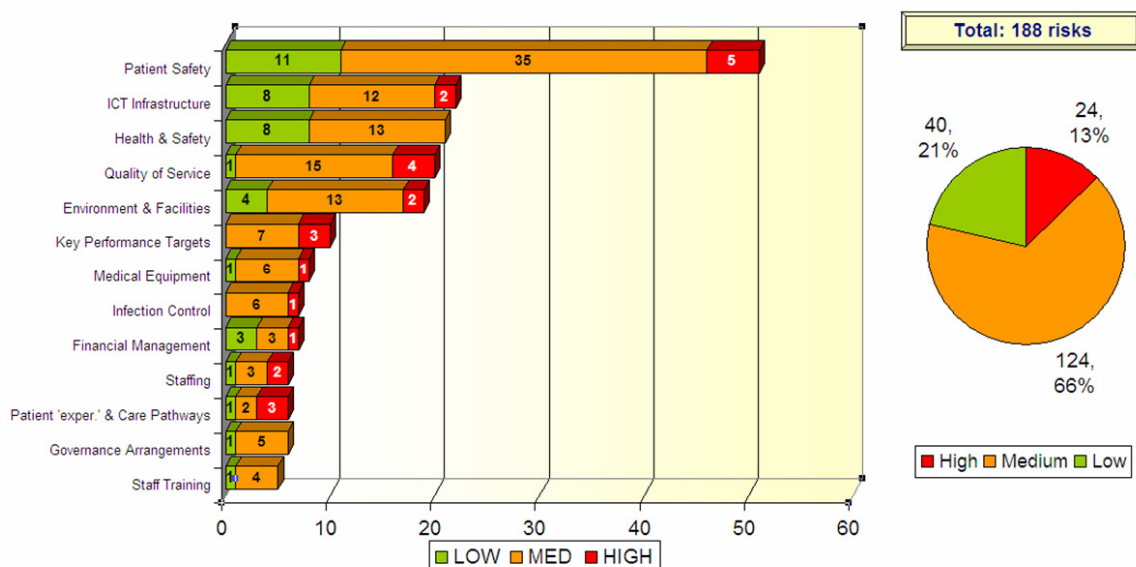
2.0 Risk Profile Report

The Trust risk profile bar charts show the themes and risk score for all risks recorded on the risk register. This is included for information to show the breadth of the risk assessments that have been carried out and which areas have the most significant.

The second table highlights the variation in sources used to identify risks. This highlights a good balance between proactive risk assessment and reactive assessment following an incident. Through risk assessment training and regular review of the risk register the Trust is aiming to increase the proactive risk assessment process to try and reduce the number of risks highlighted by incident.

The next three tables go on to show the current significant risk register, risk which have been closed and risks which have been mitigated to a level that they are no longer considered significant.

TRUST RISK PROFILE



2.1 New Risks

Three new significant risks were added to the Trust Wide Risk Register within the reporting period (Quarter 2 2012/13)

The relevant risk description is set out below and the associated risk rating and planned controls can be viewed using the link provided (also available in the risk profile report).

Risk 1356: Failure of the cervical cytology service to maintain the 98% turnaround target.

From the end of Sept 2012, risk of cervical cytology not being able to sustain the service within the target of 98% reported within the 14 day turnaround time. The risk is due to senior staff resignations and retirements, originally 3.6wte now reduced to 0.6wte. Recruitment was not an option due to the service relocation to Brighton. Original plan was to relocate the service by Oct / Nov 2012 but this is now unlikely due to issues at Brighton.

Risk 1360: EME Services staffing levels

Within an establishment of 5 technicians there are two posts vacant at a band 5 level and one vacant at a band 6 level. ie for the team overall the staffing level is 57% of establishment but for the technician posts it is at 40%. This means we are unable to service the medical devices of the Trust to a level that would be acceptable to both internal audit and external inspection. An ideal level of assets in-date for service would be 100% of the asset register. A more realistic and acceptable figure (a compromise of staffing levels, access to devices and finance) from consensus with other EME departments in our bench

marking group is 80 to 85%. The Trust medical devices asset register shows our PPM level at approx 53% in-date.

Risk 1359: Flexible Fibreoptic laryngoscope and camera stack.

The Scope is 16 years old and the components are incompatible; the picture quality is not HD and is very poor quality. Effectively making this piece of equipment difficult to use and unserviceable should it break.

Closed Risks

Two significant risks were closed in Q2.

Risk 1187: Non-compliant medical gas cylinder store

All works completed. Now compliant with HTM and independent audit confirmed compliance actions

Risk 1182: Olympus ScopeGuide 3-D Imager

Equipment has now been purchased and in place

Changes in Risk rating

Significant Risks with Increased Rating

Risk 552: Delay in Issuing completed radiology examination Reports

Description: Risk to patient outcome and treatment pathway, failure to meet key KPI's for report turnaround times as a consequence of a shortfall in reporting capacity.

Risk 1173: PACS/RIS Contract ending in 2013

PACS was introduced through a national programme (NPFIT) into SASH in May 2007. Originally the contract was held by Fujitsu, but was taken over by CSC mid contract. The current contract terminates in mid 2013 when theoretically the equipment could be removed as it is leased. There is no guidance from DoH regarding what will happen at the end of the contract and the Trust needs to consider its options.

Significant Risks with Decreased Rating

Risk 1134: Poor liquidity ratio impacting on cash position

Risk 979: Policy and Procedure for Thromboprophylaxis

Risk 1083: Gamma Camera (Scintronix) failure

Risk 1200: RSI incidence for implementation of scanning services

Risk 1220: Risk of using ED as an escalation area

Risk 1058: Delivery of controlled drugs in palliative care using inappropriate IV pumps

Risk 1221: Risk assoc. with the opening of escalation areas at times of severe capacity shortage

Risk 880: Caesarean section rate of 28%

Risk 980: Compromised delivery of acute Pediatric services due to shortage of Pediatric Registrars