

## Board of Directors (in Public)

### Item 5.1

**Subject:** High Risk Report  
**Date of Meeting:** 31<sup>st</sup> January 2024  
**Presented by:** Karan Wheatcroft, Director of Risk and Improvement  
**Purpose:** To Note

BAF Ref	Impact on BAF
All	The report includes high level risks which continue to be considered in respect of any implications for the BAF.

Level of assurance (please tick one) <i>To be used when the content of the report provides evidence of assurance</i>					
<input checked="checked" type="checkbox"/>	<b>Acceptable assurance</b> Controls are suitably designed, with evidence of them being consistently applied and effective in practice	<input type="checkbox"/>	<b>Partial assurance</b> Controls are still maturing – evidence shows that further action is required to improve their effectiveness	<input type="checkbox"/>	<b>Low assurance</b> Evidence indicates poor effectiveness of controls

#### 1. Executive Summary

The Risk Registers contain significant risks identified as having potential impact on the Trust objectives. These include risks identified and escalated by the clinical divisions.

Risks are reviewed monthly at each Divisional Governance Board and quarterly by the Risk Management Committee.

This report provides an update of risks with residual scores of 15 or higher along with the action plans in place to control and/or mitigate them.

#### 2. Key Issues

There are currently four risks that have a score of 15 or above. This report is correct as at 18<sup>th</sup> January 2024.

The risks are as follows:

Risk ID	Risk Owner	Date risk identified	Review Date	Residual Score	Target score
Corporate - Risk 00001802	Chief Operating Officer	September 2022	October 2023	16	6
<p>Risk in relation to <b>Inability to deliver elective activity</b> due to mass strike action leading to disruption of services.</p> <p><b>Controls</b> – planning to ascertain the numbers of staff in unions and where they are situated Activity over the next few months is under review</p> <p><b>Actions</b> – recruitment and retention plans in Surgery. Trajectory and activity to be presented to IPC.</p>					

Risk ID	Risk Owner	Date risk identified	Review Date	Residual Score	Target score
Clinical Services (Radiology) – Risk 00001588	Clinical Director Radiology	June 2021	November 2023	16	6
<p>Risk to performing unsupervised CT and MRI scans within 6 weeks of receiving the referral</p> <p><b>Controls</b> – existing consultants are covering as many sessions as they can. Either by reorganising workloads or by doing additional paid sessions. Partnership with LUFHT around CT guided biopsy service.</p> <p><b>Actions</b> – Exploration of capacity and demand for the department to facilitate business planning for additional workforce recruitment to the Radiologist staffing</p>					

Risk ID	Risk Owner	Date risk identified	Review Date	Residual Score	Target score
Surgery - Risk 00000958	DHOO – Surgery	February 2018	December 2023	16	6
<p>Risk in relation to <b>workforce pressures in theatre</b> leading to potential underperformance against the income plan.</p> <p><b>Controls</b> – working with clinical services management team who are proactively recruiting for anesthetic roles Additional agency staff in post Activity managed based on clinical urgency of patients</p> <p><b>Actions</b> – continued focus on recruitment and retention Insourcing being explored to backfill sessions</p>					

Risk ID	Risk Owner	Date risk identified	Review Date	Residual Score	Target score
Clinical Services (Radiology) – Risk 00001918	Radiology Manager	November 2023	November 2023	16	6
<p>Risk to the timeliness of patients to receive an MR diagnostic scan across pressured service lines.</p> <p><b>Controls</b> – PTL review and longest waiting patients prioritised and clinically reviewed. Mutual aid commencement with LUHFT to pool longest waiting cardiac MR patients across sites.</p> <p><b>Actions</b> – WLI additional sessions being worked up and delivered.</p>					

### 3. Recommendations

The Board of Directors is asked to note the content of this report and be assured that the Trust has systems and processes in place for the identification, management and escalation of risks.