



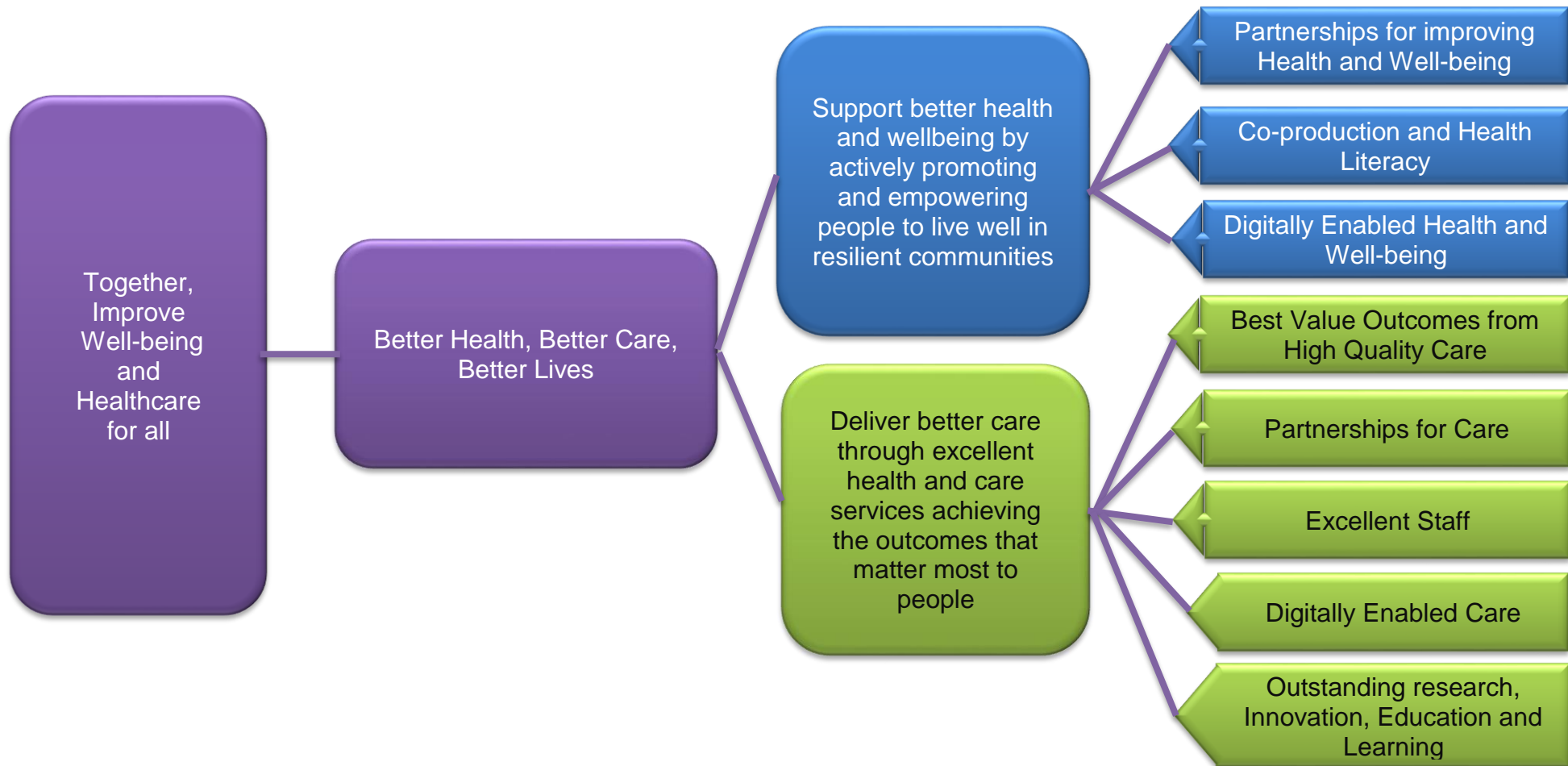
Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board

COVID-19 RISK REGISTER GOLD COMMAND 2020



Aligning Risk with Swansea Bay University Health Board (SBUHB) Strategy

The Swansea Bay University Health Board (SBUHB) strategy is outlined in the figure below and all risks identified for inclusion on the Health Board Risk Register are mapped to our enabling objectives.



**COVID-19 RISK REGISTER
DASHBOARD OF ASSESSED RISKS – GOLD COMMAND**

| | | | | | | |
|----------------------------|------------|----------|----------|----------|--------------------------------|--|
| Impact/Consequences | 5 | | | | | R_COV_005: Care Homes |
| | 4 | | | | R_COV_012: Partnership Working | R_COV_004: Workforce Shortages – Self Isolation R_COV_008: Capacity R_COV_009: Workforce – Field Hospitals R_COV_010: Delivery of Essential Care |
| | 3 | | | | | R_COV_001: Shortage of Critical Care drugs R_COV_002: Shortage of Palliative Care drugs R_COV_003: Inadequate supply of PPE R_COV_011: BAME Workforce Risks R_COV_013: Test, Trace and Protect |
| | 2 | | | | | R_COV_006: Equipment Shortages R_COV_007: Oxygen Provision |
| | 1 | | | | | |
| C X L | 1 | 2 | 3 | 4 | 5 | |
| | Likelihood | | | | | |

COVID 19 Risk Register Dashboard

| Risk Reference | Datix ID | Description of risk identified | Initial Score | Current Score | Trend | Controls | Last Reviewed | Scrutiny Committee |
|----------------|----------|---|---------------|---------------|-------|----------|---------------|-----------------------|
| R_COV_001 | 2367 | Shortage of critical care drugs Global shortages which is affecting the UK of a number of drugs/ fluids to manage patients cared for in critical care areas could restrict number of people able to be supported in critical care unit and restrict capacity to enact full COVID critical care response plan | 25 | 15 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_002 | 2368 | Shortage of Palliative Care Drugs National shortage of palliative care drugs and access to syringe drivers which could impact on ability to provide timely care for patients at home or in hospital; causing pain for patients and distress for patients and their families. Inability to access drugs for patients at home could impact on hospital sector if these patients subsequently require hospital admission. Distress for patients in families in not being able to die in their place of choice. | 25 | 15 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_003 | 2378 | Inadequate Supply of PPE Inadequate supply of PPE could place staff at risk of harm and an increase in the number of staff infected will increase absence rates, resulting in difficulties in staffing core capacity. | 25 | 15 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_004 | 2369 | Workforce Shortages Number of staff who are absent from work through self-isolation or family illness will impact on ability to deliver safe care for patients; and will impact on ability to keep capacity open and to staff surge and super surge capacity | 25 | 20 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_005 | 2370 | Care Homes Potential failure in local care home sector to manage staff absences could result in emergency closure of care home which will place undue pressure and therefore on community health and social services to support and/or lead to an increase in patient admission to hospital. Risk of patient harm if care homes are not adequately covered. | 25 | 25 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_006 | 2371 | Equipment Shortages Inability to secure adequate supply of equipment to support phases of capacity plan which may restrict ability of Board to respond to peaks in pandemic if not mitigated. This includes availability of ventilators, CPAP, suppliers, syringe drivers | 25 | 10 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_007 | 2372 | Oxygen Provision Capacity constraints on oxygen provision at Morriston will limit number of ventilator, CPAP and high flow oxygen beds. Lack of ability to secure direct suppliers via BOC will hamper plans for oxygen provision within field hospital | 25 | 10 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |

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|-----------|------|---|----|----|---|---|------------|-----------------------|
| R_COV_008 | 2373 | Capacity Capacity requirements against national modelling mean that the HB capacity may be either insufficient to cope with demand, resulting in an inability to care for patients as well as an increased risk of excess death. Alternatively if demand is lower than predicted by the modelling we could develop capacity where it not needed resulting in avoidable expenditure. | 25 | 20 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_009 | 2374 | Workforce Inability to recruit sufficient workforce to fulfil requirements for super surge capacity in field hospitals leading which leads to impact on ability to provide additional capacity and therefore impact on delivery of patient care. | 25 | 20 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_010 | 2375 | Delivery of Essential Care Following the guidance to step down routine activity issued by Welsh Government and the pandemic Health and Social Care Response Plan. There is a risk that the HB's normal business will not be given sufficient focus and that this could lead to a negative impact on patient outcomes and experience , and cause delays to patient treatment resulting in harm | 20 | 20 | → | → | 19.06.2020 | Gold Command COVID-19 |
| R_COV_011 | 2376 | BAME Workforce Risks There is growing evidence that COVID-19 is having a disproportionate impact on individuals from BAME backgrounds. The evidence continues to evolve but the UK Intensive Care National Audit and Research Centre findings on critical care published on 24th April 2020 and the data on BAME deaths published in the Health Service Journal on 22nd April provided sufficient evidence to indicate that individuals from BAME backgrounds may be at disproportionate risk from poorer outcomes from COVID-19. | 25 | 15 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_012 | 2377 | Partnership Working There are growing tensions between the Health Board and some trade union partners within SBUHB particularly in response to the supply of PPE which has the potential to create unrest in the workforce and hamper an effective response to COVID-19. | 20 | 15 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |
| R_COV_013 | 2388 | Test, Trace and Protect Clarity over testing cell responsibility from a HB point of view and how this fits with the multi-agency TTP plan. Need to establish clear position on retesting. Staffing for expansion of Testing & establishment of Trace & Protect being identified from LAs and HB. Identifying sufficient trained / experienced staff for "clinical roles" in local and regional teams is being sourced from shielded staff. As core services are reintroduced there will be the need to recruit additional staff, which may be external and so incur costs. To date no funding from WG has been confirmed for this. Lack of availability of a digital platform from go live date for TTP of 1st June will limit capacity for Trace & Protect activities. | 20 | 15 | ↓ | ↓ | 19.06.2020 | Gold Command COVID-19 |

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|--|---|-----------------------------------|-----------------------|----|---------------|----|---|--|--|
| Datix ID Number: 2367 | R_COV_Strategic_001 | | | | | | | | |
| Risk: Shortage of critical care drugs Global shortages which is affecting the UK of a number of drugs/ fluids to manage patients cared for in critical care areas could restrict number of people able to be supported in critical care unit and restrict capacity to enact full COVID critical care response plan | Director Lead: Richard Evans, Medical Director Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> Monitoring mechanism in place for critical care drugs. Lack of hemofiltration fluids across the UK escalated to ECCW on 18/04/20. Assessment of further local contingency plan to be undertaken week beg 20th April 20 | Action | Lead | Deadline | | | | | | |
| | <i>Escalate to WG via critical care network to seek mutual aid in event of drug shortages; ongoing liaison with WG and suppliers.</i> | <i>Clinical Director Pharmacy</i> | <i>Weekly ongoing</i> | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) <ul style="list-style-type: none"> Executive monitoring/support to achieve improvement plans on a weekly basis. | Gaps in assurance (What additional assurances should we seek?) The need to deliver sustained service. | | | | | | | | |
| <p style="text-align: center;">Current Risk Rating 5 x 3 = 15</p> <table border="1" data-bbox="109 943 365 1067"> <tr> <td>Risk</td> <td>25</td> </tr> <tr> <td>Current</td> <td>15</td> </tr> <tr> <td>Target</td> <td>10</td> </tr> </table> | Risk | 25 | Current | 15 | Target | 10 | <p style="text-align: center;">Additional Comments</p> Monitoring mechanism in place for critical care drugs. Access to priority medicines dashboard with a formalised mutual aid agreements between HBs supported by Health Courier Wales. Situation improving due to UK government working to create new supply routes alongside ongoing work to reduce waste, increase production of ready to administer medicines and the availability of unlicensed medicines. Anxiety remains about the potential of further peaks alongside the recommencing of routine care. National guidance on the essential role of medicines in recommencing routine care is expected and will reiterate the importance of organisations ensuring that any procedure which requires an anaesthetic, sedative, analgesic or neuromuscular blocker has assessed that the Medicines are available and can be replenished, if not that there are readily available substitutes and that stocks are sufficient to manage any emergency requirement for these drugs such as in the case of Covid 19. SBU pharmacy team have a four day buffer stock which will be kept to manage any emergency situation. | | |
| Risk | 25 | | | | | | | | |
| Current | 15 | | | | | | | | |
| Target | 10 | | | | | | | | |

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|---|--|----------------------------|-----------------|----|---------------|----|--|--|--|
| Datix ID Number: 2368 | R_COV_Strategic_002 | | | | | | | | |
| Risk: Shortage of Palliative Care Drugs National shortage of palliative care drugs and access to syringe drivers which could impact on ability to provide timely care for patients at home or in hospital; causing pain for patients and distress for patients and their families. Inability to access drugs for patients at home could impact on hospital sector if these patients subsequently require hospital admission. Distress for patients in families in not being able to die in their place of choice. | Director Lead: Richard Evans, Medical Director Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> Local distribution plan now refined to be able to supply drugs at home quickly as required whilst preserving central stock. The Health Board has adopted Welsh Government guidance on the potential for re-using critical supplies in nursing homes and will follow the all Wales Standard Operating Procedure in adopting this flexibility and will put in place a review and audit mechanism | Action | Lead | Deadline | | | | | | |
| | Ongoing liaison with suppliers and WG to identify further supplies. | Clinical Director Pharmacy | Weekly ongoing | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) <ul style="list-style-type: none"> Executive monitoring/support to achieve improvement plans on a weekly basis. | Gaps in assurance (What additional assurances should we seek?) The need to deliver sustained service. | | | | | | | | |
| Current Risk Rating 5 x 3 = 15 <table border="1" data-bbox="107 943 365 1067"> <tr> <td>Risk</td> <td>25</td> </tr> <tr> <td>Current</td> <td>15</td> </tr> <tr> <td>Target</td> <td>10</td> </tr> </table> | Risk | 25 | Current | 15 | Target | 10 | Additional Comments Increased agility to supply limited stocks through the following access routes 1st line - Community Pharmacies (including those holding additional palliative medicines stocks) • 2nd line – The Palliative Hub at Morriston Hospital Pharmacy Department • 3rd line – The national COVID-19 end of life medicine service (available 24/7) • 4th Line – repurposing of medication at the care home in accordance with the attached SOP | | |
| Risk | 25 | | | | | | | | |
| Current | 15 | | | | | | | | |
| Target | 10 | | | | | | | | |

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|---|--|---------------------|-----------------|----|---------------|----|---|--|--|
| Datix ID Number: 2378 | R_COV_Strategic_003 | | | | | | | | |
| Risk: Inadequate Supply of PPE Inadequate supply of PPE could place staff at risk of harm and an increase in the number of staff infected will increase absence rates, resulting in difficulties in staffing core capacity. | Director Lead: Gareth Howells, Director of Nursing Assuring Committee: Gold Command COVID-19 Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> Alternative decontamination options being worked through for some items to enable re-use. Military assistance in place in Morriston from 20/04/20 to support improvement in logistics operation | Action | Lead | Deadline | | | | | | |
| | Strengthened central distribution of PPE in place with electronic feed of supply requirements from individual units. Stock levels monitoring via dashboard. Pursue of local supply options underway for PPE with large supply anticipated in 01/05/20 and further quantities on order. | Director of Nursing | Weekly ongoing | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) | Gaps in assurance (What additional assurances should we seek?) | | | | | | | | |
| <ul style="list-style-type: none"> Executive monitoring/support to achieve improvement plans on a weekly basis. | The need to deliver sustained service. | | | | | | | | |
| Current Risk Rating 5 x 3 = 15 | Additional Comments | | | | | | | | |
| <table border="1"> <tr> <td>Risk</td> <td>25</td> </tr> <tr> <td>Current</td> <td>15</td> </tr> <tr> <td>Target</td> <td>10</td> </tr> </table> | Risk | 25 | Current | 15 | Target | 10 | Supplies have increased with regular reporting from units of a minimum of 24hrs in unit stores, most PPE items 48hrs plus, with a further 48hrs held in HQ central store. Confirmation of current and new suppliers providing steady supply of PPE to the Health Board. | | |
| Risk | 25 | | | | | | | | |
| Current | 15 | | | | | | | | |
| Target | 10 | | | | | | | | |

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|---|---|----------------------------|-----------------|----------------|----|---------------|---|---|--|
| Datix ID Number: 2369 | R_COV_Strategic_004 | | | | | | | | |
| Risk: Workforce Shortages Number of staff who are absent from work through self-isolation or family illness will impact on ability to deliver safe care for patients; and will impact on ability to keep capacity open and to staff surge and super surge capacity | Director Lead: Hazel Robinson, Director of Workforce | | | | | | | | |
| | Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> Operational deployment group now operational to balance staff workforce across current capacity. Field hospital staffing model identified; and will be triggered on basis of move to super surge with deployment in line with agreed minimum staffing requirements | Action | Lead | Deadline | | | | | | |
| | Workforce silver is leading a recruitment drive to secure additional workforce; robust occupational health service in place to identify and test staff quickly and get them back to work; | Director of Workforce | Weekly ongoing | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) | Gaps in assurance (What additional assurances should we seek?) | | | | | | | | |
| <ul style="list-style-type: none"> Executive monitoring/support to achieve improvement plans on a weekly basis. | The need to deliver sustained service. | | | | | | | | |
| Current Risk Rating 5 x 4 = 20 | | Additional Comments | | | | | | | |
| <table border="1"> <tr> <td>Risk</td> <td>25</td> </tr> <tr> <td>Current</td> <td>20</td> </tr> <tr> <td>Target</td> <td>8</td> </tr> </table> | | Risk | 25 | Current | 20 | Target | 8 | Staff absent for Covid-19 reasons self-isolation/shielding or symptomatic has reduced by nearly 50%. Workforce engaged on detailed review of shielding staff with a view to possible use in priority work that can be undertaken at home. | |
| Risk | 25 | | | | | | | | |
| Current | 20 | | | | | | | | |
| Target | 8 | | | | | | | | |

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|---|--|-------------|-----------------|----|---------------|----|----------------------------|--|--|
| Datix ID Number: 2370 | R_COV_Strategic_005 | | | | | | | | |
| Risk: Care Homes Potential failure in local care home sector to manage staff absences could result in emergency closure of care home which will place undue pressure and therefore on community health and social services to support and/or lead to an increase in patient admission to hospital. Risk of patient harm if care homes are not adequately covered. | Director Lead: Hilary Dover, Director of Primary and Community Services Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> • HB has provided temporary support to one care home and working closely with social services. Emergency care home procedure in place enacted via CSSIW. • Escalated to WG on 16/04/20 with strong view from WG that HB should not step in unless in extremis. • Patients in vulnerable care homes being assessed and actions put in place on individual clinical basis to admit if required. | Action | Lead | Deadline | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) <ul style="list-style-type: none"> • Executive monitoring/support to achieve improvement plans on a weekly basis. | Gaps in assurance (What additional assurances should we seek?) The need to deliver sustained service. | | | | | | | | |
| Current Risk Rating 5 x 5 = 25 <table border="1" data-bbox="107 906 365 1034" style="margin-left: auto; margin-right: auto;"> <tr> <td>Risk</td> <td style="text-align: center;">25</td> </tr> <tr> <td>Current</td> <td style="text-align: center;">25</td> </tr> <tr> <td>Target</td> <td style="text-align: center;">15</td> </tr> </table> | Risk | 25 | Current | 25 | Target | 15 | Additional Comments | | |
| Risk | 25 | | | | | | | | |
| Current | 25 | | | | | | | | |
| Target | 15 | | | | | | | | |

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|---|---|---------------------|-----------------|----|---------------|---|----------------------------|--|--|
| Datix ID Number: 2371 | R_COV_Strategic_006 | | | | | | | | |
| Risk: Equipment Shortages Inability to secure adequate supply of equipment to support phases of capacity plan which may restrict ability of Board to respond to peaks in pandemic if not mitigated. This includes availability of ventilators, CPAP, suppliers, syringe drivers | Director Lead: Darren Griffiths, Director of Finance | | | | | | | | |
| | Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> Detailed equipment schedule prepared. | Action | Lead | Deadline | | | | | | |
| | Infrastructure Silver reviewing equipment provision to ensure that all requests are being pursued via national and local supply chains. For update on 23/04/20 | Director of Finance | Weekly ongoing | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) | Gaps in assurance (What additional assurances should we seek?) | | | | | | | | |
| <ul style="list-style-type: none"> Executive monitoring/support to achieve improvement plans on a weekly basis. | The need to deliver sustained service. | | | | | | | | |
| <p style="text-align: center;">Current Risk Rating 5 x 2 = 10</p> <table border="1"> <tr> <td>Risk</td> <td>25</td> </tr> <tr> <td>Current</td> <td>10</td> </tr> <tr> <td>Target</td> <td>5</td> </tr> </table> | Risk | 25 | Current | 10 | Target | 5 | Additional Comments | | |
| Risk | 25 | | | | | | | | |
| Current | 10 | | | | | | | | |
| Target | 5 | | | | | | | | |
| | Ventilators to come through critical care network - all other items either ordered or in place. Llandarcy and Bay (phases 1, 2 and 3A equipped) - hold on equipping final phase to assess demand, Risk likelihood reduced to reflect progress made. | | | | | | | | |

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|--|---|---------------------|-----------------|----|---------------|---|---|--|--|
| Datix ID Number: 2372 | R_COV_Strategic_007 | | | | | | | | |
| Risk: Oxygen Provision Capacity constraints on oxygen provision at Morriston will limit number of ventilator, CPAP and high flow oxygen beds. Lack of ability to secure direct suppliers via BOC will hamper plans for oxygen provision within field hospital | Director Lead: Darren Griffiths, Director of Finance | | | | | | | | |
| | Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> Detailed risk assessment completed and mitigating actions in place to balance the oxygen usage across Morriston across the 2 VIE systems. Alternative source of supply being sourced to provide oxygen at field hospital. | Action | Lead | Deadline | | | | | | |
| | Further request submitted to WG to support prioritisation of Morriston for upgrade in flow rates at one VIE at Morriston to boost oxygen flow rate. | Director of Finance | Weekly ongoing | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) | Gaps in assurance (What additional assurances should we seek?) | | | | | | | | |
| <ul style="list-style-type: none"> Executive monitoring/support to achieve improvement plans on a weekly basis. | The need to deliver sustained service. | | | | | | | | |
| Current Risk Rating 5 x 2 = 10 | Additional Comments | | | | | | | | |
| <table border="1"> <tr> <td>Risk</td> <td>25</td> </tr> <tr> <td>Current</td> <td>10</td> </tr> <tr> <td>Target</td> <td>3</td> </tr> </table> | Risk | 25 | Current | 10 | Target | 3 | BOC solution agreed for Llandarcy - risk reduced to reflect this. Risk will reduce further when in situ. 19.06.20: Concrete base complete for Oxygen facility at Llandarcy, building under construction. BOC due to attend site end of week commencing 22nd June and MES piping to complete installation week commencing 29th June. Recently closed but being monitored in relation to provision at Bay Hospital. | | |
| Risk | 25 | | | | | | | | |
| Current | 10 | | | | | | | | |
| Target | 3 | | | | | | | | |

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|---|--|-------------------------|-----------------|----|--------|---|--|--|--|
| Datix ID Number: 2373 | R_COV_Strategic_008 | | | | | | | | |
| Risk: Capacity Capacity requirements against national modelling mean that the HB capacity may be either insufficient to cope with demand, resulting in an inability to care for patients as well as an increased risk of excess death. Alternatively if demand is lower than predicted by the modelling we could develop capacity where it not needed resulting in avoidable expenditure. | Director Lead: Chris White, Chief Operating Officer Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> • | Action | Lead | Deadline | | | | | | |
| | Create flexible capacity plans that can be stepped up or down depending on demand and in line with other factors such as workforce, or medicines constraints | Chief operating Officer | Weekly ongoing | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) <ul style="list-style-type: none"> • Executive monitoring/support to achieve improvement plans on a weekly basis. | Gaps in assurance (What additional assurances should we seek?) The need to deliver sustained service. | | | | | | | | |
| Current Risk Rating 5 x 4 = 20 | Additional Comments | | | | | | | | |
| <table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Risk</td> <td style="width: 50%;">25</td> </tr> <tr> <td>Current</td> <td>20</td> </tr> <tr> <td>Target</td> <td>8</td> </tr> </table> | Risk | 25 | Current | 20 | Target | 8 | | | |
| Risk | 25 | | | | | | | | |
| Current | 20 | | | | | | | | |
| Target | 8 | | | | | | | | |

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|--|---|----------------------------|-----------------|----|---------------|----|---|--|--|
| Datix ID Number: 2374 | R_COV_Strategic_009 | | | | | | | | |
| Risk: Workforce Inability to recruit sufficient workforce to fulfil requirements for super surge capacity in field hospitals leading which leads to impact on ability to provide additional capacity and therefore impact on delivery of patient care. | Director Lead: Hazel Robinson, Director of Workforce | | | | | | | | |
| | Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| • | Action | Lead | Deadline | | | | | | |
| | Additional workforce are being recruited through national and local campaigns including the return of retired NHS professionals | Clinical Director Pharmacy | Weekly ongoing | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) | Gaps in assurance (What additional assurances should we seek?) | | | | | | | | |
| • Executive monitoring/support to achieve improvement plans on a weekly basis. | The need to deliver sustained service. | | | | | | | | |
| Current Risk Rating 5 x 4 = 20 | | Additional Comments | | | | | | | |
| <table border="1"> <tr> <td>Risk</td> <td>25</td> </tr> <tr> <td>Current</td> <td>20</td> </tr> <tr> <td>Target</td> <td>10</td> </tr> </table> | Risk | 25 | Current | 20 | Target | 10 | Both Medical and Nursing student now deployed within the HB. Plans for recruitment and deployment under regular review to meet service planning as it evolves. Additional recruitment to be undertaken as required. | | |
| Risk | 25 | | | | | | | | |
| Current | 20 | | | | | | | | |
| Target | 10 | | | | | | | | |

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|---|--|-------------|-----------------|----|--------|---|----------------------------|--|--|
| Datix ID Number: 2375 | R_COV_Strategic_010 | | | | | | | | |
| Risk: Delivery of Essential Care Following the guidance to step down routine activity issued by Welsh Government and the pandemic Health and Social Care Response Plan. There is a risk that the HB's normal business will not be given sufficient focus and that this could lead to a negative impact on patient outcomes and experience, and cause delays to patient treatment resulting in harm | Director Lead: Chris White, Chief Operating Officer Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> • Urgent OP work will continue utilising digital solutions wherever possible. • Agreed list of exceptions in place; urgent cancer work is being preserved as far as practicable given other constraints. • Use of Sancta to provide some urgent cancer treatment. • Discussions on regional footprint to identify potential solutions for urgent work where appropriate. • Morryston remains open to the Burns network. | Action | Lead | Deadline | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) <ul style="list-style-type: none"> • Executive monitoring/support to achieve improvement plans on a weekly basis. | Gaps in assurance (What additional assurances should we seek?) The need to deliver sustained service. | | | | | | | | |
| Current Risk Rating 5 x 4 = 20 <table border="1" data-bbox="107 906 365 1031" style="margin-left: auto; margin-right: auto;"> <tr> <td>Risk</td> <td>20</td> </tr> <tr> <td>Current</td> <td>20</td> </tr> <tr> <td>Target</td> <td>8</td> </tr> </table> | Risk | 20 | Current | 20 | Target | 8 | Additional Comments | | |
| Risk | 20 | | | | | | | | |
| Current | 20 | | | | | | | | |
| Target | 8 | | | | | | | | |

| Datix ID Number: 2376 | R_COV_Strategic_011 | | | | | | | | | | |
|---|--|----------------|------|--------|---------|----------|--|-----------------------|----------------------------|--|--|
| Risk: BAME Workforce Risks There is growing evidence that COVID-19 is having a disproportionate impact on individuals from BAME backgrounds. The evidence continues to evolve but the UK Intensive Care National Audit and Research Centre findings on critical care published on 24th April 2020 and the data on BAME deaths published in the Health Service Journal on 22nd April provided sufficient | Director Lead: Hazel Robinson, Director of Workforce Assuring Committee: Gold Command COVID-19 Date last reviewed: 19 th June 2020 | | | | | | | | | | |
| Controls (What are we currently doing about the risk?) <ul style="list-style-type: none"> A risk assessment tool has been made available by Welsh Government to support the identification of health care workers from a BAME background and to support the a risk assessment is to identify those individuals who may fit into this additional vulnerable group in order to prevent insofar as is possible, a worsening of the existing racial disparities in our communities. BAME individuals will need to have a discussion with their line managers and a risk assessment undertaken on an individual basis giving due recognition to their profession or role in the organisation and their likely risk of current exposure to COVID-19. It is recognised that it is not possible to assess for all possible risk factors in this current environment. Factors such as genetics, socioeconomic factors, geographical and above all cultural factors will have an effect on risk – however they cannot be assessed here in this context and will need to form part of the risk assessment tool. | Mitigating actions (What more should we do?) <table border="1" data-bbox="1155 440 2136 932"> <thead> <tr> <th data-bbox="1155 440 1749 475">Action</th> <th data-bbox="1749 440 1960 475">Lead</th> <th data-bbox="1960 440 2136 475">Deadline</th> </tr> </thead> <tbody> <tr> <td data-bbox="1155 475 1749 932">The impact on services will be reassessed after the initial risk assessment process has concluded.</td> <td data-bbox="1749 475 1960 932">Director of Workforce</td> <td data-bbox="1960 475 2136 932">Weekly ongoing</td> </tr> </tbody> </table> | | | Action | Lead | Deadline | The impact on services will be reassessed after the initial risk assessment process has concluded. | Director of Workforce | Weekly ongoing | | |
| Action | Lead | Deadline | | | | | | | | | |
| The impact on services will be reassessed after the initial risk assessment process has concluded. | Director of Workforce | Weekly ongoing | | | | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) <ul style="list-style-type: none"> Executive monitoring/support to achieve improvement plans on a weekly basis. | Gaps in assurance (What additional assurances should we seek?) The need to deliver sustained service. | | | | | | | | | | |
| <table border="1" data-bbox="96 1035 1155 1228"> <tr> <td colspan="2" data-bbox="96 1035 1155 1102" style="text-align: center;">Current Risk Rating 5 x 3 = 15</td> </tr> <tr> <td data-bbox="96 1102 237 1145">Risk</td> <td data-bbox="237 1102 1155 1145">25</td> </tr> <tr> <td data-bbox="96 1145 237 1189">Current</td> <td data-bbox="237 1145 1155 1189">15</td> </tr> <tr> <td data-bbox="96 1189 237 1228">Target</td> <td data-bbox="237 1189 1155 1228">8</td> </tr> </table> | Current Risk Rating 5 x 3 = 15 | | Risk | 25 | Current | 15 | Target | 8 | Additional Comments | | |
| Current Risk Rating 5 x 3 = 15 | | | | | | | | | | | |
| Risk | 25 | | | | | | | | | | |
| Current | 15 | | | | | | | | | | |
| Target | 8 | | | | | | | | | | |

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|---|---|-------------|-----------------|----|---------------|---|----------------------------|--|--|
| Datix ID Number: 2377 | R_COV_Strategic_012 | | | | | | | | |
| Risk: Partnership Working There are growing tensions between the Health Board and some trade union partners within SBUHB particularly in response to the supply of PPE which has the potential to create unrest in the workforce and hamper an effective response to COVID-19. | Director Lead: Hazel Robinson, Director of Workforce Assuring Committee: Gold Command COVID-19 | | | | | | | | |
| | Date last reviewed: 19 th June 2020 | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> • Frequent meetings will continue to take place, supplemented by local discussions when required. • Employees will be encouraged to raise concerns via existing mechanisms and directly to the Chief Executive. • We will continue to utilise the daily briefings to be transparent about issues such as PPE to improve confidence in the supply and availability. • Chief Executive and other Executive Directors will attend HB Partnership Forum on a regular basis. Partnership principles and ways of working will be emphasised as the most effective approach to secure progress. | Action | Lead | Deadline | | | | | | |
| Assurances (How do we know if the things we are doing are having an impact?) <ul style="list-style-type: none"> • Executive monitoring/support to achieve improvement plans on a weekly basis. | The Health Board will continue to develop an effective working relationship with all trade union partners and collectively via the agreed HB Partnership Forum. | | | | | | | | |
| Current Risk Rating 4 x 4 = 16 | Gaps in assurance (What additional assurances should we seek?) The need to deliver sustained service. | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Risk</td> <td style="text-align: center;">20</td> </tr> <tr> <td>Current</td> <td style="text-align: center;">16</td> </tr> <tr> <td>Target</td> <td style="text-align: center;">8</td> </tr> </table> | Risk | 20 | Current | 16 | Target | 8 | Additional Comments | | |
| Risk | 20 | | | | | | | | |
| Current | 16 | | | | | | | | |
| Target | 8 | | | | | | | | |

| | | | | | | | | | |
|---|--|----------------------|-----------------|----|---------------|---|--|--|--|
| Datix ID Number: 2388 | R_COV_Strategic_011 | | | | | | | | |
| <p>Risk: <u>Test, Trace and Protect</u> Clarity over testing cell responsibility from a HB point of view and how this fits with the multi-agency TTP plan. Need to establish clear position on retesting. Staffing for expansion of Testing & establishment of Trace & Protect being identified from LAs and HB. Identifying sufficient trained / experienced staff for "clinical roles" in local and regional teams is being sourced from shielded staff. As core services are reintroduced there will be the need to recruit additional staff, which may be external and so incur costs. To date no funding from WG has been confirmed for this. Lack of availability of a digital platform from go live date for TTP of 1st June will limit capacity for Trace & Protect activities.</p> | <p>Director Lead: Sian Harrop-Griffiths, Director of Strategy Assuring Committee: Gold Command COVID-19 Date last reviewed: 19th June 2020</p> | | | | | | | | |
| Controls (What are we currently doing about the risk?) | Mitigating actions (What more should we do?) | | | | | | | | |
| <ul style="list-style-type: none"> Overall structure agreed, further discussions regarding delivery of specific HB elements. Multiagency testing plan and overarching TTP Plan agreed and submitted to WG. Guidance on HB stance on retesting being prepared by KR for inclusion in Testing Plan. Staffing plan developed and discussions being held with identified members of staff to populate required teams. | Action | Lead | Deadline | | | | | | |
| | Need to establish clear position on retesting. | Director of Strategy | Weekly ongoing | | | | | | |
| <p>Assurances (How do we know if the things we are doing are having an impact?)</p> <ul style="list-style-type: none"> Executive monitoring/support to achieve improvement plans on a weekly basis. | <p>Gaps in assurance (What additional assurances should we seek?)</p> <p>.</p> | | | | | | | | |
| <p>Current Risk Rating 5 x 3 = 15</p> <table border="1" data-bbox="107 1110 365 1233"> <tr> <td>Risk</td> <td>20</td> </tr> <tr> <td>Current</td> <td>15</td> </tr> <tr> <td>Target</td> <td>8</td> </tr> </table> | Risk | 20 | Current | 15 | Target | 8 | <p>Additional Comments</p> <p>Discussion with WG planned over funding w/c 25.06.20 with potential for follow up letter - TBA at Directors Call on 28.06.20.</p> | | |
| Risk | 20 | | | | | | | | |
| Current | 15 | | | | | | | | |
| Target | 8 | | | | | | | | |

Risk Score Calculation

For each risk identified, the LIKELIHOOD & CONSEQUENCE mechanism will be utilised. Essentially this examines each of the risks and attempts to assess the likelihood of the event occurring (PROBABILITY) and the effect it could have on the Health Board (IMPACT). This process ensures that the Health Board will be focusing on those risks which require immediate attention rather than spending time on areas which are, relatively, a lower priority.

| Risk Matrix | LIKELIHOOD (*) | | | | |
|------------------|----------------|--------------|--------------|--------------|--------------|
| | 1 - Rare | 2 - Unlikely | 3 - Possible | 4 - Probable | 5 - Expected |
| 1 - Negligible | 1 | 2 | 3 | 4 | 5 |
| 2 - Minor | 2 | 4 | 6 | 8 | 10 |
| 3 - Moderate | 3 | 6 | 9 | 12 | 15 |
| 4 - Major | 4 | 8 | 12 | 16 | 20 |
| 5 - Catastrophic | 5 | 10 | 15 | 20 | 25 |