

South Wales Trauma Network Risk Log

Sponsor:	SRO	Complied by:		BH/AB
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Please do not adjust the formatting / layout of this log

Remember! A risk is an uncertain event that, should it occur, will have an effect (negative or positive) of the achievement of objectives

Risk ID	Risk Category	Risk Title	Cause	Event	Effect	Current Risk Score / Severity			Management & Mitigation	Since Last Review	Date raised	Date for review	Risk Owner	Risk Response	Comments & Updates	Post Mitigation Expected Risk Score / Severity			Risk Target Date
			"If xxx (cause) occurs"	"then xxx (event) may happen"	"which will result in xxx (effect)"	Consequence	Likelihood	Total								Consequence	Likelihood	Total	
<i>Risk Identifier</i>	<i>Choose category the risk falls into</i>	<i>Staff engagement (Example Risk)</i>	<i>If staff are not fully engaged in the programme</i>	<i>Then there may be resistance to the upcoming changes</i>	<i>Which will result in a slowing of progress and changes not being accepted.</i>	<i>Assign Score 1-5 (see guidance)</i>	<i>Assign Score 1-5 (see guidance)</i>		<i>Choose how the risk is going to be dealt with (see guidance for definitions)</i>	<i>State direction of travel since last review</i>	<i>20/02/2018</i>	<i>20/03/2020</i>	<i>Joe Bloggs</i>	<i>22/02/18 - Discussed at workstream meeting and assigned owner with list of mitigating tasks.</i>	<i>Describe actions undertaken to control and mitigate the risk</i>	<i>Assign Score 1-5 (see guidance)</i>	<i>Assign Score 1-5 (see guidance)</i>		<i>20/03/2020</i>
ODN 012	Operational	COVID-19 Recovery	COVID-19 impact	has forced the reorganisation of services locally and enforced relocation of services locally within MTC & TU sites	resulting in the requirement and execution of a comprehensive recovery plan within HB's & commissioned services prior to SWTN launch	2	2	4	Treat containment	↔	20/03/2020	20/10/2022	HB's & ODN	For major trauma to feature as part of organisational recovery plans, rather than seperately and investment has been made already in major trauma services across the system. Major Trauma is an essential service and as such needs to feature in all recovery plans	COVID recovery ongoing. Major Trauma is an essential service, therefore will need to be maintained through COVID surges. Will monitor Health Board issues through network meetings. 9/12/21- There is a risk around critical care capacity linked to increased demand associated to the COVID 19 pandemic specifically with regards to sudden surges in activity linked to the pandemic- recorded on MTC risk register 30/05/22- Inpatient COVID recovery is ongoing throughout NHS Wales and is progressing. The redesign of major trauma services, specifically the 'landing pad' model is being explored at a local level in order to develop mitigation plans and progress through the upcoming IMTP process. Local HB plans are required by the ODN for initial evaluation by September 2022. 13/07/22-SWTN Escalation Policy produced to mitigate any future issues regarding the movement of major trauma patients through the network as required, including in the event of any further surges. 22/09/22- No issues from last RR input, ODN monitoring operational activity and deployment of 'Escalation Policy' as appropriate. 10/10/22- Post covid recovery plans mean that rehabilitation areas are not fully operational across the Network. ODN monitoring operational activity and	2	3	6	01/10/2022
ODN 013	Operational	COVID-19 Implication on training	COVID-19 impact	COVID-19 escalation took place during the beginning of the comprehensive training plan organised by the SWTN	resulting in no current improvement of the training gap identified in order to go live	2	2	4	Treat containment	↔	28/03/2020	20/10/2022	ODN	ODN creating remote training packages to meet training requirements while ensuring pandemic clinical management and social distance conditions are met.	Development of E-Learning platform. Filming complete for TTM course along with clinical skills. TTM and rehab filming planned for Oct/Nov. 1/12/2020 - due to COVID no further filming able to take place. 10/3/21- Filming and creation of TTL training planned to take place in July 2021- covid restrictions pending 4/6/21- TTL & pre-hospital filming take place w/c 21/6/21, which has now taken place 8/9/21- Education platform to be launched by time of Governance. Clinical Skills available in the initial launch to be followed by scenario based learning in the Autumn 2021. 9/12/21- Issues with ePlatform being approved by cyber security & IG- being escalated by ODN. Mitigation to launch scenarios via SWTN Teams page in December 2021. 28.1.22 - DR still working with HEIW and DCHW to resolve platform issues. Aim to go live with team marvel 7/2/22 07/04/22- All T&E material available via SharePoint at present. IG issues with IT platform resolved- platform in state of testing with operational members of major trauma teams to identify any anomalies prior to launching. 13/07/22- Launch of T&E platform due for July 2022. There is evidence that more f2f training has recently been taking place. 22/9/22- Monitoring use of T&E platform by ODN, currently low uptake so mediation plan in place to publicly launch profile etc.-re-review March 2023	2	1	2	12/05/2022
ODN 017	Clinical	Face to face training for WAST Operational staff	Inability to undertake face to face training due to COVID.	Road staff may not have the adequate skills to manage major trauma patients as per network guidelines.	Major trauma patients not being recognised or treated in accordance with guidelines	3	2	6	Escalate	↔	10/08/2020	20/10/2022	WAST	Discussions ongoing via the ODN with WAST regarding the development of an E-Learning platform	Meeting with education lead. WAST onclck training - 800 staff trained. Plans being put in place for e-learning 10/3/21-WAST scenarios to be part of SWTN filming schedule to take place in July 2021- covid restrictions pending, this has taken place 08/09/21- WAST scenarios in post production phase, to be launched on SWTN eduation platform in Autumn 2021 by June 2022 9/12/21- Scenarios due to be launched via SWTN Teams page in December 2021 07/04/22- Scenario's launched via MS Teams and SharePoint pages in January 2022. 30/05/22- Evaluation of access to/completion of this training will reduce the risk-evaluation to be carried out by ODN T&E lead in June 2022 at 6 months post launch 13/07/22- WAST utilising senior paramedic role to deliver 'hot' training and publisising the SWTN on rideouts. Day 1 of the WAST CPD programme for 2021/22 is focussed on major trauma and encorporates all elements, changes in patient flow and clinical decision making from a major trauma perspective. 22/09/22- Further developed disposition of patients for pre-hospital staff requires further training for Silver trauma patients and orthoplastic patients identified at scene, ODN to monitor compliance & progress in conjunction with WAST	2	2	4	01/09/2022
ODN28	Financial	No orthopaedic capacity commissioned to meet orthoplastic demand	No orthopaedic capacity commissioned to meet orthoplastic demand	Challenge of supporting current levels of orthoplastic activity when elective work recommences. Lack of specialist trauma orthopaedic surgeon support for orthoplastics	resulting in reduced available orthoplastic activity and potential delays in patient care across the network	3	2	6	Tolerate	↔	22/02/2021	20/10/2022	SBUHB & Network	ODN currently working alongside SBUHB to mitigate prior to the returning elective activity. Year 2/3 SWTN orthoplastic plans and submission to WHSSC 2022/23 CIAG process to mitigate	Year 1 cover has been bridged by utilising vacant orthopaedic posts to appoint trauma specialist consultants. This is in lieu of elective sessions that will be required for orthopaedic recovery. That is likely to come on line in Q3/4 2021/22 via modular theatre proposal in NPT, pending recurrent solutions via WG capital business case process (SOC stage at present) 8/9/21- Awaiting feedback from WHSSC JC with regards to allocation of 2021/22 underspend. 9/12/21- WHSSC funding approved and allocated to mitigate risk for 21/22 financial year-risk may increase in new financial year (2022/23) due to WHSSC funding being non-recurrent. ODN awaiting information regarding SBUHB mitigation for April 2022 onwards. 28.1.22 final JC committee decision due early Feb 07/04/22-New resource and additional session funded by WHSSC. ODN A/W SBUHB delivery plans for assurance. ODN met with HS to discuss on 07/04/22 30/05/22- Funding allocated via WHSSC commissioning intention. Service required to write a Business Justification Case to release funding at a HB level, process underway locally, due to be completed by June 2022. Six months lead in time expected for recruitment therefore risk due to be mitigated in January 2023. 13/07/22- Risk tolerated. Increased orthopaedic sessions allocated via CIAG process. New appointment into Orthopaedic post commenced	3	2	6	01/01/2023

ODN29	Premises Operational Risk	Orthoplastic Trauma Activity in SBUHB	Significant numbers of cases requiring freeflap surgery via the MTN and no dedicated orthoplastics theatre capacity at Morriston	however, orthoplastic trauma theatres not originally commissioned in Morriston as part of MTN development	resulting in an impact on ortho trauma and plastics trauma lists. This affects local and national patients from accessing theatre in an efficient & timely manner.	2	2	4	Tolerate	↔	22/02/2021	20/10/2022	SBUHB & Network	ODN currently working alongside SBUHB to mitigate prior to the returning elective activity	Year 2/3 MTN plans for dedicated orthoplastic theatre proposed via workforce & service development group for support and in WHSSC 2022/23 CIAG submissions 8/9/21- Awaiting feedback from WHSSC JC with regards to allocation of 2021/22 underspend and/or development of IMTP submissions for 2022. 9/12/21- WHSSC funding approved and allocated to mitigate risk for 21/22 financial year- risk may increase in new financial year (2022/23) due to WHSSC funding being non-recurrent. ODN awaiting information regarding SBUHB mitigation for April 2022 onwards. 28/1/22 - final JC decision due early feb 07/04/22- Theatre capacity and resource funded by WHSSC. ODN A/W SBUHB delivery plans for assurance. ODN met with HS to discuss on 07/04/22, further orthoplastic services meeting due to take place on 20/04/22 30/05/22- Funding allocated via WHSSC commissioning intention. Service required to write a Business Justification Case to release funding at a HB level, process underway locally, due to be completed by June 2022. Six months lead in time expected for recruitment therefore risk due to be mitigated in January 2023. 13/07/22- Risk tolerated. Recruitment underway for theatre staff to mitigate this risk. Paraeil BJC being progressed for long term solution. 22/09/22- Orthoplastic theatre sessions to increase in Morriston Hospital to meet orthoplastic demand. Morriston Hospital managing situation- ODN working collaboratively with Morriston and monitoring.	2	2	4	01/01/2023
ODN30	Premises Operational Risk	Location of flap monitoring unit	Flap monitoring unit for orthoplastic cases. Capacity is required for 'green' elective free flap cases	Not enough capacity for orthoplastic free flap and elective free flap post op monitoring.	the commissioning of separate trauma & elective areas will have to be considered with subsequent space and staffing requirements	4	3	12	Treat contingent	↔	22/02/2021	20/10/2022	SBUHB	SBUHB investigating locally. Awaiting resolution or mitigation.	Year 2/3 MTN plans for dedicated orthoplastic flap monitoring unit proposed via WHSSC 2022/23 CIAG Process 8/9/21- Awaiting feedback from WHSSC JC with regards to allocation of 2021/22 underspend and/or development of IMTP submissions for 2022. 28/1/22 - flap monitoring unit requested as additional WHSSC funding for 22/23. JC decision due early feb 07/04/22- Flap monitoring unit supported by WHSSC. ODN A/W SBUHB delivery plans for assurance. ODN met with HS to discuss on 07/04/22, further orthoplastic services meeting due to take place on 20/04/22 30/05/22 & 13/07/22- 4 ring-fenced beds commissioned by WHSSC for management of SWTN patients for flap management & monitoring. Business Justification Case required to release the current allocated WHSSC funding and detailed review of the requirement being undertaken by local HB orthoplastic service. Funding allocated for January 2023 onwards therefore risk mitigation unlikely to be realised until June 2023 due to estate requirement s and lead times for appointments. 22/09/22- ring-fenced orthoplastic beds identified for pre-hospital direct admission. SBUHB COO leading stream of work- date of implementation to be confirmed by SBUHB late October 22	3	3	9	01/06/2023
ODN32	Governance	TARN PROMS & PREMS	PROMS & PREMS to be launched throughout SWTN	potential of incorrect data representation	resulting in a risk during the launch and embedding stage	2	1	2	Tolerate	↔	04/03/2021	20/10/2022	HB's & ODN	1 year baseline TARN data to be in place prior to launch of PROMS & PREMS. Benefit to be monitored & realised in Year 2. Arranging meeting with TARN to enable TU submission of PROMS/PREMS. 4/6/21- Meeting with TARN to take place. Currently TARN provide PROMS for MTC's only, solution for TU PROMS required Added to Issue Log due to the above 30/06/2021- TARN have agreed to roll out PROMS to all TU's in SWTN for 12 months free of charge as a trial, currently awaiting launch. ODN working with National PROMS Programme to look at ways of jointly supporting this initiative with a proposed start date of January 2022. Downgraded from issues log back to Risk Register as a result of SWTN meeting with TARN. To be monitored as a risk until launched and reviewed. 9/12/21- Project support manager appointed to facilitate the roll out of PROMS in January 2022. 07/04/22- Project support manager role re-advertised. Ongoing work with VIH and Neuroproactive taking place via ODN Team. 30/05/2022 & 13/07/22- Project support manager role appointed, work to begin in July 2022 when new appointment starts in post and progress with pace. MTC patients to be focus of pilot to develop working model then roll out to all HB's thereafter. Risk to reduce throughout the 12 month secondment however to be terminated at point of full launch of roll out. 22/09/22- Roll out of PROMS throughout SWTN in development. All HB's to go live with digital PROMS by January 2023.	2	2	4	01/05/2023	
ODN33	Operational	Repatriation	Any increase in significant operational pressures in hospitals	could potentially cause a delay in repatriation to from MTC to the LHB	resulting in potential capacity issues for MTC	3	2	6	Treat containment	↔	18/03/2021	20/10/2022	HB's & ODN	Enact surge plan in event of increased Covid cases Maintain close contact with HB's Maintain early identification of potential repatriation requirements from MTC to LHB's. Downgraded from an Issue to a risk at Network Governance Day 18/03/2021- to be monitored by ODN via TRIDs and operational catch ups with Health Boards 28/1/22 - some HBs having delays with repatriations due to operational pressures 07/04/22- Operational pressures increased across Wales currently resulting in delayed repatriations across the SWTN. 30/05/2022- This is consistently monitored by the ODN. At time of review timely repatriations have improved and risk reduced. 13/07/22 & 22/09/22- Formal repatriation evaluation underway. Results will be presented at COB & DAG (Oct 22). The evaluation will enable the SWTN to refine the process where required. ODN working with HB's to regularly complete the SITREP for notification of any capacity difficulties and identification of mitigating actions early on.	3	2	6	01/07/2022	
ODN35	Human Resources	WAST Trauma Desk	Staff absence in WAST Trauma Desk team	has led to a lack of resource to cover the Trauma Desk as originally proposed	resulting in requirement for EMRTS to provide unplanned cover resulting in a negative impact on performance	3	2	6	Treat containment	↓	30/06/2021	20/10/2022	WAST	Resilience resolution being explored within WAST. Likely advert for a 6 month secondment position at a cost pressure to cover the 1 x long term sickness. ODN & WAST to meet to discuss. ODN awiting formal update from WAST. Being monitored via TRID's/Occurance Log 8/9/21- Secondment position filled, currently yet to commence in post 9/12/21- secondment position in place however further resignations received. WAST going out to advert for permanent position to replace resignation W/C 13/12/21 28/1/22 - 1 x vacancy with Trauma desk. mitigation put in place over Christmas due to rota gaps. waiting for outcome of replacement post 07/04/22- Remains a problem at present. EMRTS Desk covers when able. Awaiting long term resilience plan from WAST, to be discussed at next WAST meeting due early May 2022. 13/07/22- WAST have recruited to the permanent post so complement of permanent trauma desk staff is back to 3 WTE. ODN awaiting notification if the secondment will continue to ensure complement of 4 is in place to cover 12/7 trauma desk requirement. 22/09/22- Recruitment of further appointment into Trauma Desk position ensuring complimant of 4 trauma desk staff in place. Appointment still in training at present. 10/10/22- New trauma desk staff member in post and fully inducted.	3	2	6	01/07/2022	

ODN37	Operational	WAST Transport	Lack of availability of WAST transport vehicles	causing a delay in both secondary transfers into the MTC & repatriations to resident health boards	resulting in a delay in access to MTC level care for patients and operational capacity issues in MTC	3	4	12	Treat containment	↔	08/07/2021	20/10/2022	WAST	WAST NEPTS working internally to address WAST capacity issues	Highlighted a COB on 8/7/21- ODN awaiting formal update from WAST. Being monitored via TRID's. ODN imminently setting up a working group with WAST & MTC to address this risk. 8/9/21- Trauma Desk to support complex transfers and pathway 3 transfers with theatre time target- to be reviewed & monitored via weekly ODN/MTC meetings 9/12/21 Repatriation information has been analysed by the ODN and presented to Health Boards in letters to the SRO's and major trauma teams. Focused meetings with SRO's have been arranged with health boards with increased delays in repatriation. 9/12/21- Meeting held between WAST, ODN & EASC to discuss- actions from meeting to be carried out and follow up meeting arranged where updated position on the discharge transport model will be provided by WAST & EASC. 07/04/22- Repatriation continues to be monitored by the ODN via TRID's and escalated where required and via ODN & WAST/EASC meetings. WAST currently looking at a private provider. ODN awaiting update at meeting scheduled with WAST & EASC for May 2022. 30/05/2022- WAST developing the national Transfer & Discharge model. Presentation to be delivered at DAG in August 2022. 13/07/22 & 22/09/22- Private provider solution explored to support the requirement of secondary transfers, this was not supported. ODN continuing to monitor secondary transfer delays, at present these have reduced. 10/10/22- ODN monitoring via TRIDs and discussed at regular catch ups	3	2	6	01/04/2023
ODN38	Management of Information & Data	Sharing of Clinical Images & Information across SWTN both radiology and via non-helath approved communication apps resulting in medico-legal vulnerability	Lack of access to the sharing of imaging, clinical results and photographic evidence of injuries for patients across the SWTN	will appear to those looking at the patient's digital record that the imaging an/or diagnostics did not occur	resulting in a misrepresentaion and misinformation regarding a patient's care and clinical journey	3	2	6	Treat containment	↔	28/07/2021	20/10/2022	HB's / DHCW	ODN to formally request that C&VUHB reconcile NHS numbers for any investigations on all digital systems including those investigations performed on 'unknown' patients.	8/9/21- to be monitored via TRID's 28/1/22 - ongoing work nationally with an aim to resolve 07/04/22- As above- Informatics clinical lead working with DHCW for input into national work stream. 13/7/22 & 22/09/22- Image sharing solution in place for inter-network sharing, awaiting national work for long term solution.	2	2	4	01/04/2023
ODN39	Clinical	Appropriate local management of repatriated patients requiring complex management & rehabilitation medicine consultant dedicated sessions	Patients repatriated to LHB's with complex injuries	may be repatriated to an inappropriate ward for the care needs required	resulting in patients receiving sub-optimal care as a result of being bedded on an inappropriate ward, creating an inequity for patients across the SWTN	4	3	12	Treat containment	↔	08/09/2021	20/10/2022	ABUHB	Original agreement in ABUHB was for patients to be managed by specific consultants on identified wards however capacity on wards not available therefore access to services an issue. Being escalated to Assistant Medical Director and Director of Therapies team.	15/9/2021 – ODN have met with ABUHB MD/planning leads to discuss need and requirement for rehab medicine to support management and discharge of complex patients. Plan for in year resourcing. Follow-up required to determine status. 28/1/22 - agreement by AB to fund 4 sessions of rehab medicine. network rehab lead aware and incorporating these sessions into plan going forward 07/04/22- As above, further detail to be provided as available. 13/07/22- Landing pad model in LHB's being progressed by ODN. ODN to receive progress reports on development at regular catch up meetings with HB's 22/09/22- Provider workplans for 2022/23 to be formally received by COB and DAG in October 22. ODN formally meeting with rehabilitation medicine providers to discuss solution for ABUHB	3	2	6	01/12/2022
ODN43	Clinical	ICU > ICU transfers across SWTN	Failure to secure appropriate lines of communication between critical care units and major trauma teams	can cause delayed transfers and delayed engagement with the local major trauma team	resulting in sub-optimal management of patient from a rehabilitation and/or major trauma services point of view	3	4	12	Terminate	↔	08/09/2021	20/10/2022	ODN & All HB's	ICU > ICU repatriation policy being developed by SWTN in conjunction with TU ICU and Major Trauma representatives, Critical Care Network & MTC.	Due for sign off and circulation for pilot period of 6 months in October 2021. Launched in November 2021- being monitored by the ODN via TRIDs and operational catch up's with Health Boards 28/1/22 - review of all ITU-OUT repatriations for major trauma patients being undertaken 30/05/22- Formal evaluation of all ICU > ICU transfers being undertaken by ODN AHP lead. To be formally reported in June 2022 13/07/22- Formal evaluation remains ongoing. Will be presented to Critical Care colleagues from critical care network and UHW critical care for further exploration and input before final report published. 22/09/22- ICU > ICU repatriation policy evaluation and amendments to policy to be formally signed off at COB & DAG in October 2022	2	3	6	01/07/2022
ODN44	Programme	Level One Training	All HB's required to reach 80% level 1 ED training and work ongoing to scope the current position with regards to level 1 ward training	in order to provide proficient major trauma care	that meet the standards of the SWTN and National Trauma Network Quality Indicators	3	3	9	Treat contingent	↔	08/09/2021	20/10/2022	ODN & HB's	Most HB in a relatively good position. Some will struggle. Level 1 resources being provided by Network end of September – plans to help design delivery with individual HB's as required.	If not attained 80% by peer review, will certainly be under good progress. 9/12/21- All training materials shared with Health Boards & train the trainer sessions completed. 13/07/22 & 22/09/22 - Health boards presented adequate levels of level 1 ED trained staff at peer review. Scoping excersise for network level 1 ward trained staff being led by SWTN Matron and AHP Lead consultant to take place.	2	2	4	01/03/2023
ODN46	Clinical	Speciality Rehabilitation provision for SWTN patients	Availability of beds at both Neurorehabilitation Unit at Llandough and NPT	for varying reasons	has resulted in complex patients waiting for specialist rehabilitation for extended periods in both the MTC and TU's	3	4	12	Treat containment	↔	08/09/2021	20/10/2022	CAVUHB	Formal response from CAVUHB that unit will be open to admissions from 9/9/21. Staggered patient admission planned for all patients waiting (6 patients across spines & neuro at present after 2x admissions on 7/9/21).	15/9/2021 – Proposal for spinal nursing/therapy outreach developed by spinal rehab consultants. Route of approval for this to be defined. 9/12/21- Proposal for spinal nursing/therapy outreach currently sat with clinical board in C&VUHB. ODN awaiting update 30/05/22- Proposal due to be shared with WHSSC. ODN still awaiting sight of proposal. 13/07/22- ODN to develop improved working relationships with both units. Both units to complete SWTN SITREP in order to highlight capacity issues or required repatriations at the earliest opportunity. 22/09/22- Introductory visits arranged for October 22 with new SWTN Operational Manager, Clinical Director and team.	3	2	6	01/04/2023
ODN47	Management of Information & Data	E-Referral Software	Some organisations using the H2H software	feel it is not fit for purpose	and are therefore not willing to go live with the software iteration	2	3	6	Treat containment	↔	19/01/2022	20/10/2022	All / DHCW	SWTN Informatics lead to explore the use of the eReferral system within Welsh Clinical Portal as a medium term mitigaion while DHCW develops the longer term national plan.	7/04/22- Dependent on work stream of National Group via DHCW 13/07/22 & 22/09/22- SWTN Informatics clinical lead to explore WCP eReferral ability	2	3	6	01/04/2023
ODN48	Operational	Major Trauma ICU Capacity	3 ICU beds were commissioned as part of the SWTN however, due to various demand in the MTC ICU capacity transfers have taken place	these require investigation regarding the requirement for MTC rehabilitation requirements post patient ICU admission	and an evaluation regarding major trauma patients transferred from MTC ICU to TU ICU including their rehabilitation requirements when ICU admission has been stepped down to take place	4	4	16	Treat containment	↔	02/02/2022	20/10/2022	MTC & ODN		02/02/22- SWTN Lead AHP assessing all MT patients transferred from MTC ICU to TU ICU and their rehabilitation requirements and outcomes (24 patients). 07/04/22- The above evaluation is ongoing. Update to be provided June 2022. 13/07/22- Evaluation is ongoing and will be discussed with input from critical care network in late July 2022. The review will be used to model the number of ICU beds used by major trauma patients in the MTC vs the predicted number required and commissioned. 22/09/22- Evaluation ongoing- being led by the ODN.	4	3	12	01/04/2023

ODN49	Clinical	Escalation of patients for secondary transfer into the MTC	Adherence and/or interpretation of the Automatic Acceptance policy	can result in the lack of acceptance of secondary transfer patients into the MTC	meaning that unsuitable patients remain in local DGH's and do not receive the benefit of MTC holistic care	4	3	12	Tolerate	↔	09/12/2021	20/10/2022	All	Review of automatic acceptance policy to clarify process Automatic Acceptance policy reviewed at COB and ready for circulation. Automatic Acceptance policy circulated, to be reviewed further in August/September 2021. 9/12/21 Automatic Acceptance policy reviewed and to remain the same for a further time period of 6 months- formal letter from SWTN regarding the Automatic Acceptance Policy shared with all HB's to be disseminated locally to all speciality teams.	09/12/21- Reduced from an issue to a risk at Governance and COB. 07/04/22- Decline of secondary transfers by the MTC continues to reduce. ODN to monitor via TRID's and re-review of Automatic Acceptance policy to take place in June 2022 13/07/22 & 22/09/22- Review of Automatic Acceptance Policy took place. Agreement reached that no changes were to be made and another review would take place in 6 months (Jan 2023) or sooner if required.	4	2	8	01/09/2022
ODN50	Clinical	Psychology Provision for Major Trauma Patients	There is an inequity of liaison psychiatry/psychology provision for major trauma patients in the MTC	as Liaison Psychiatry input varies based on parent health board	MTC Psychologist has facilitated discussions between mental health services supported by other MTC clinicians as an interim solution.	3	4	12	Treat contingent	↔	07/04/2022	20/10/2022	All	Network wide meeting being convened to discuss this with mental health services for long term strategy	13/07/2022- Inaugural Rehabilitation Strategy group took place 13/07/22. Group will progress this agenda as a priority. 22/09/22- SWTN ODN are working collaboratively with third sector organisation in order for major trauma patients to utilise counselling and psychological support via the service in the absence of formal NHS services.	3	3	9	01/04/2023
ODN51	Clinical	Provision of Community Neurerehabilitation Services	The funding for community neurerehabilitation services	is due to cease at the end of March 2023	resulting in the loss of community rehabilitation services that support major trauma patient discharge and rehabilitation in the community	3	4	12	Treat contingent	↔	21/04/2022	20/10/2022	All	Network wide meeting being convened to discuss this and work with NCIG thereafter to develop a strategy.	13/07/22- ODN awaiting update from NCIG and to address as part of strategic rehabilitation group agenda 22/09/22- All providers notified and discussed as part of IMTP/ 2022/23 workplan discussions at bi-monthly health board catch up meetings with the ODN.	3	3	9	01/04/2023
ODN54	Clinical	Rehabilitation prescriptions are not currently given to patients.	Due to a patient friendly document not currently being available, rehabilitation prescriptions are not currently provided to patients.	Then patients may not receive adequate information regarding their injuries and consequent care received.	This may mean they miss outpatient appointments/receive less follow up advice. Have less information to pass on to future care providers.	3	3	9	Treat containment	↔	Feb-22	20/10/2022	All	Patient suitable rehabilitation prescription to be developed at network level, led by Strategic Rehabilitation group.	13/07/2022- Rehab prescription not being shared with patients was noted in peer review reports and improvement on this was recommended. The inaugural Rehabilitation Strategy group meeting took place 13/07/22. Group will progress this agenda item as a priority. 22/09/22- Workshop on the rehabilitation prescription to progress imminently- being led by SWTN Lead AHP.	1	1	1	10/01/2023
ODN55	Human Resources	Provision of Physiotherapy Service for MTC Orthopaedic Patients in Morriston Hospital	Both a recent and gradual increase in Plastic Surgery activity, due to major trauma activity has not been matched with an increase in physiotherapy resource	In order to support the consultant led orthopaedic follow up clinic that forms part of the Major Trauma Centre pathway. This clinic is typically for the post op management of lower limb open fractures with plastic surgical reconstruction	resulting in the following risks as a result of this dilution of clinical skills- * Insufficient capacity for elective follow up * Poor outcomes increasing the need for secondary surgery * Inappropriate use of Consultant time referring patients for physiotherapy and giving advice * Lack of succession planning * Disruption to other physiotherapy services attempting to cover the work	3	4	12	Treat containment	↔	23/06/2022	20/10/2022	SBUHB	Currently the service is in the process of requesting resource funding through the WHSSC CIAG process. Submissions are being considered by WHSSC in August 2022. Local mitigation currently underway is listed below- * Prioritisation of patients occupying beds * Help from the Burns team * Written patient information being utilised	Awaiting outcome of CIAG review to know if proposal progressing through WHSSC governance processes thereafter	1	1	1	01/04/2023
ODN56	Policy Implementation	All Wales Mass Casualty Plans & incorporating SWTN processes	Currently the All Wales Mass Casualty plans do not incorporate the changes in flow introduced across SW Wales with the launch of the SWTN	If a Mass casualty event were to take place currently	patients would be inappropriately dispersed across SW Wales and would not receive timely MTC level care if required	5	2	10	Treat contingent	↔	13/07/2022	20/10/2022	ODN & WG	The ODN are working with the All Wales Mass Casualty group to develop an updated plan. The following mitigations are in place- * Template provided by the ODN and to be completed by HB's for the first 2hrs of capacity and services present at each site * Table top exercise took place (Celtic Consolidation) to explore the new patient flows * Another table top exercise planned to further explore the renewed plan * Publication of revised plan anticipated September 2022	13/07/22- Awaiting date for second table top exercise from All Wales Group 22/09/22- Revised Mass Casualty plan shared and desktop exercise to take place in October 22. ODN currently reviewing plan and will attend desktop exercise to ensure SWTN pathways are adhered to.	2	2	4	01/10/2022
ODN57	Policy Implementation	Awareness of secondary transfer pathways	Lack of awareness of secondary transfer pathways	has resulted in patients not being transferred to the MTC in a timely manner	and in some cases having an effect on major trauma care	4	2	8	Treat containment	↔	Mar-21	20/10/2022	All HB's & ODN	Network interactive scenario based training being developed, ED charge nurse training and further role defining of trauma desk in secondary transfer pathways	Workplan developed and Interactive quiz being delivered throughout March 2021. Currently HDUHB training completed and handed over to the MTP's (H DUHB) to progress further. Quiz rolled out to all HB's- training to take place locally 8/9/21- Being monitored via TRID's and HB's required to provide detail on number of courses delivered & attendee's. 9/12/21- Continues to be monitored as above 07/04/22- continues to be monitored via TRID's and Occurance Log entries. ODN to recommend a further roll out of the interactive training and provision of education & training in focus areas as required. 28/04/22- Downgraded to a Medium Issue as incidence numbers reducing and training ongoing 13/07/22- Issue downgraded to a risk. Incidents still occur however are reducing and ODN monitoring delivery of local pathway training at HB catch up meetings. 22/09/22- Being monitored by the ODN via TRIDs & Trauma Desk occurrence log entries- led by SWTN Matron.	2	2	4	01/06/2023
ODN58	Management of Information & Data	Discrepancy of major trauma data	Currently there is a discrepancy of data across multiple data sources used throughout the SWTN	TARN Analytics, the Major Trauma Database and local business intelligence systems do not correlate beyond expected discrepancies due to TARN eligibility etc.	resulting in the potential for inaccurate reporting of major trauma activity	3	4	12	Treat containment	↑	29/09/2022	20/10/2022	All HB's & ODN	MTC currently undertaking an evaluation of the discrepancy in C&V and will report back through COB. ODN to support wider evaluation- tasks to be defined.		2	2	4	01/04/2023