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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



Meeting Date	09 August 2022	Agenda Item	2.2
Report Title	Risk Management Report		
Report Author	Neil Thomas, Assistant Head of Risk & Assurance		
Report Sponsor	Hazel Lloyd, Interim Director of Corporate Governance		
Presented by	Neil Thomas, Assistant Head of Risk & Assurance		
Freedom of Information	Open		
Purpose of the Report	The purpose of this report is to inform the Workforce & OD Committee of the risks within the Health Board Risk Register (HBRR) assigned to the Committee for scrutiny.		
Key Issues	<ul style="list-style-type: none"> • The Health Board Risk Register (HBRR) was last received by the Workforce & OD Committee (WODC) in April 2022. • Since then risks have been subject to update by the Management Board in June 2022 and further review and revision by Executive Directors in July 2022. The June HBRR extract attached to this report reflects the changes made during the late June/early July period. • The HBRR currently contains 40 risks, of which four have been allocated to the Workforce & OD Committee (WODC) for oversight, and two are overseen by other Committees, but reported to WODC for information. For oversight: <ul style="list-style-type: none"> ○ 3 – Workforce recruitment of medical & dental staff ○ 51 – Nurse Staffing Levels Act ○ 76 – Partnership Working ○ 77 – Workforce Resilience For information: <ul style="list-style-type: none"> ○ 81 – Midwifery: Critical Staffing Levels ○ 82 – Closure of Burns Service • At its meeting in July 2022, the Board has asked that the WODC consider the workforce risks to identify any changes required to update the entries to reflect the current risk level facing the health board, and to consider the mitigating actions. 		
	Information	Discussion	Assurance
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Recommendations	Members are asked to: <ul style="list-style-type: none"> • NOTE the updates to the Health Board Risk Register (HBRR) relating to risks assigned to the Workforce & OD Committee. • CONSIDER the workforce risks in accordance with the Board request to identify any changes required to update the entries to reflect the current risk level facing the health board, and to consider the mitigating actions. 		

HEALTH BOARD RISK REPORT

1. INTRODUCTION

The purpose of this report is to inform the Workforce & OD Committee of the risks within the Health Board Risk Register (HBRR) assigned to the Committee for scrutiny.

2. BACKGROUND

2.1 Risk Management Framework

The Audit Committee is responsible for overseeing the overall operation of the risk management framework and providing assurance the Board in that respect. While this is the case, individual risks have been assigned to other Board committees for more detailed scrutiny and assurance, with the intention that committee work programmes be aligned so that progress made to address key risks is reviewed in depth. Regular HBRR update reports are submitted to the Health Board and the committees of the Board to support this.

Executive Directors are responsible for managing risk within their area of responsibility.

Risk Register management is supported by a Risk Management Group (RMG) which is responsible for overseeing the operational management of risk, ensuring local systems and processes are in place and are operating effectively to ensure appropriate reporting and escalation. The Group meets quarterly and it last met in June 2022.

Additionally, a Risk Scrutiny Panel meets monthly, and is responsible for moderating new risks and escalated risks to the Health Board Risk Register (HBRR) and Board Assurance Framework (BAF). Executive Directors are notified and consulted with, as appropriate, in terms of the escalation and de-escalation of risks. The Panel last met in June 2022.

2.2 Risk Appetite

Risk appetite and tolerance provide clarification on the level of risk the Board is prepared to accept.

Prior to the Covid-19 Pandemic, the Board's risk appetite required that action should be taken as a priority to address risks scored at 16 and above. There is a low tolerance to taking risk where it would have a high impact on the quality and safety of care being delivered to patients.

Following the onset of the Covid-19 pandemic, members of the Board agreed that the risk appetite score would increase to 20 and above for an initial period of 3 months. The risk appetite level of 20 and above has remained in place since the start of the pandemic. These arrangements are reviewed regularly by the Executive Team, Audit Committee and the Board. In accordance with Board wishes, a more nuanced approach to the expression of risk appetite is being developed.

2.3 Health Board Risk Register (HBRR)

The Health Board Risk Register (HBRR) is intended to summarise the greatest organisational risks facing the Health Board and the actions being taken to mitigate them.

Each Health Board risk has a lead Executive Director who is responsible for ensuring there are mechanisms in place for identifying, managing and alerting the Board to significant risks within their areas of responsibility through regular, timely and accurate reports to the Management Board/Executive Team, relevant Board Committees and the Board.

2.4 Covid-19 Risk Register

In recognition that Covid-19 is an issue which the Health Board is managing, a separate risk register was established to capture the key risks associated with managing the response to the pandemic. The final meeting of the Covid-19 Gold Command took place in April 2022. At that meeting, arrangements for the ongoing oversight of the remaining risks on the Covid-19 Gold risk log were agreed. Within the Datix risk register each risk has been assigned an executive lead, a senior manager accountable to the executive lead for the management of the risk, and a risk owner responsible for the management of the risk and update of risk information within the risk register.

3. MANAGEMENT OF HEALTH BOARD RISK REGISTER (HBRR)

3.1 Action to Update the HBRR

The HBRR was last received by the Workforce & OD Committee in April 2022. Since then risks have been subject to update by the Management Board in June and further review and revision by Executive Directors in July. The June HBRR extract at Appendix 1 reflects the changes attached to this report reflects the changes made during the late June/early July period.

The HBRR currently contains 40 risks, of which four have been allocated to the Workforce & OD Committee (WODC) for oversight, and two are overseen by others, but reported to WODC for information.

Of the four risks assigned to the Workforce & OD Committee for oversight, two are at or above the Health Board's current risk appetite score of 20. There are no changes to overall risk levels since the last meeting to report. The status of these risks and updates on actions are summarised below and presented in more detail within the Health Board Risk Register extract included at **Appendix 1**.

Following receipt of the earlier May 2022 iteration of the HBRR at its meeting in July 2022, the Board has asked that the WODC consider the workforce risks to identify any changes required to update the entries to reflect the current risk level facing the health board, and to consider the mitigating actions:

Risk	Exec Lead	Current Rating	Target Rating	Change
HBR 3 Workforce Recruitment Risk of failure to recruit medical & dental staff	Director of Workforce and Operational Development	20	12	→
Update Actions remain as before, but target dates have been refreshed: <u>Ongoing Actions (targets as previously)</u> Action 1: Medical training initiatives pursued in a number of specialties to ease junior doctor recruitment Lead: Director W&OD Target Date: 31/03/2023 Action 2: The Medical Workforce Board continues to monitor recruitment and junior doctor's rotas. Lead: Director W&OD Target Date: 31/03/2023 Action 3: Continue to recruit internationally. Lead: Director W&OD Target Date: 31/03/2023 Action 4: Continue to work with head hunters Lead: Director W&OD Target Date: 31/03/2023				

Risk	Exec Lead	Current Rating	Target Rating	Change
HBR 51 Nurse Staffing Levels Act Risk of Non Compliance with the Nurse Staffing (Wales) Act (2016)	Executive Director of Nursing	20	8	→
Update June position: No change from previous month's risk scores. Monthly NSA (Nurse Staffing Levels Act) Steering Group discussed scores and corporate risk remains at 20. Mental Health Service Group score = 20 Neath Port Talbot & Singleton Adults = 20, Paediatrics and Neonatal = 20 Maternity = 20 District nursing = 20 Mental Health = 15. June Acuity audit underway. Safecare system roll out continues in line with plans, aiming for completion November 2022. Service groups report that student streamlining has been successful. Improving COVID related sickness and most shielding colleagues now returned to work, some in different capacity. Vacancies reported on 15.6.22 are 336 Band 5 and 132 Band 2. <u>Ongoing actions (these remain the same, but target dates have been refreshed):</u> Action 1: Student Streamlining and Overseas recruitment Lead: Executive Director of Nursing				

Target Date: 31/10/2022 (Monthly ongoing)

Action 2: The Board should ensure a system is in place that allows the recording, review and reporting of every occasion when the number of nurses deployed varies from the planned roster. Implementation of *Safecare*, commenced 1st February – roll out plan is 32 weeks.

Lead: Executive Director of Nursing

Target Date: 01/11/2022 (Monthly ongoing)

Risk	Exec Lead	Current Rating	Target Rating	Change
HBR 76 Partnership Working Relationships with some trade union partners	Director of Workforce and Operational Development	10	5	➔

Update

Following from two facilitated sessions in October 2021 with Staffside Colleagues, HR colleagues, Executives and Service Groups reps, on what partnership working in SBU looks like and any improvements that are required, an action plan was derived which has been agreed and signed off by the Director of Workforce and OD and the Staff Side Chair. The action plan has been taken through Health Board Partnership Forum and will be overseen through that forum. Further work has also been undertaken on the Health Board Partnership Forum with clear escalation framework produced for agenda items.

As the health board moves to manage Covid as endemic we have still seen some concerns raised at Partnership Forum by staff side covering PPE issues in this transitional period. However, these concerns have not been on the same scale or intensity as previously seen at the height of the pandemic. The risk score has not been adjusted but over the coming months the score is expected to reduce and the risk as framed reviewed with a view to closure.

Remaining Action (Target date refreshed)

Action: Develop an effective working relationship

Lead: Assistant Director of Workforce & OD

Target Date: 31/09/2022.

Risk	Exec Lead	Current Rating	Target Rating	Change
HBR 77 Workforce Resilience Culmination of the pressure and impact on staff wellbeing - both physical and mental relating to Covid Pandemic.	Director of Workforce and Operational Development	12	10	➔

Update

Employee Support Reviews to be introduced July 2022. Working being undertaken with HR colleagues to ensure TRiM and Wellbeing Champion resource is aligned with high areas of sickness absence. (Figures in relation to TRiM and REACT training have increased and been reflected in the main Risk Register entry Controls section.)

The Covid Risk Assessment tool has been reviewed by Welsh Government, and Occupational Health case conferences renamed 'Employee Support Reviews.'

Revised Action

Action 1: OH Case conferences renamed 'Employee Support Reviews.' SOP (Standard Operating Procedure) developed and to be introduced to improve dialogue with all parties to support employees return to work.

Lead: Professional Head of Staff Health & Wellbeing

Target Date: 29/07/2022

Further detail on the above risks can be found at **Appendix 1**.

In addition to the above risks assigned to the Workforce & OD Committee, the below table indicates risks overseen by other Committees but included in the HBRR extract report to this Committee for information:

Ref	Description of Risk Identified	Exec Lead	Committee	Current Score
81 (2788)	Critical staffing levels – Midwifery: Unplanned absence resulting from Covid-19 related sickness, shielding and isolation, alongside other current absences, has resulted in critical staffing levels, further reductions in which could result in unsafe service provision, poor patient outcomes and/or experience. In turn, poor service quality or reduction in services could impact on organisational reputation.	Executive Director of Nursing	Q&S Committee	20
82 (2554)	Risk of closure of Burns service if Burns Anaesthetic Consultant cover not sustained There is a risk that adequate Burns Consultant Anaesthetist cover will not be sustained, potentially resulting in closure to this regional service, harm to those patients would require access to it when closed and the associated reputational damage. This is caused by: <ul style="list-style-type: none">• Significant reduction in Burns anaesthetic consultant numbers due to retirement and long-term sickness• Inability to recruit to substantive burns anaesthetic posts• The reliance on temporary cover by General intensive care consultants to cover while building work is completed in order to co-locate the burns service on General ITU• Reliance on capital funding from Welsh Government to support the co-location of the service	Executive Medical Director	P&F Committee <i>Also Q&S Committee for information</i>	16 (reduced from 20)

Entries in the risk register relating to these risks have been refreshed since the last meeting, but some in relation to midwifery staffing require further update. This has

not been possible in June due to unplanned absence of key staff within the service but arrangements are in hand to undertake this in the first weeks of July.

3.2 Operational Workforce & OD Risks

Each Service Group and Directorate hold their own risk registers, which outline the operational risks facing them.

Any operational risks relating to Workforce & OD can be escalated to the Risk Scrutiny Panel which may co-opt a member of the Workforce & OD team or seek the views of an Executive Director to consider the risk, controls in place and action to be taken to mitigate the risk, and whether the risk should be considered for inclusion on the Health Board Risk Register.

4. GOVERNANCE AND RISK

4.1 Risk Appetite & Tolerance Levels

As noted earlier, the current risk appetite, as endorsed by the Board in November 2021 indicates that risks assessed at a threshold score of 20 or above should be addressed as a priority, and there is a low tolerance to risks with a high impact on the quality and safety of staff and patient care.

Following discussion at Board, further work has been done to develop a more nuanced approach to risk appetite and proposals will be subject to Board consideration shortly.

5. FINANCIAL IMPLICATIONS

There are financial implications to minimising the risks entered on the HBRR in relation to significant revenue implication around strengthening resources in the Health Board, Service Groups and Directorates. Capital monies will also be required in relation to supporting the improvements required to improve and further detail is provided in the individual entry on the HBRR.

6. RECOMMENDATIONS

Members are asked to:

- **NOTE** the updates to the Health Board Risk Register (HBRR) relating to risks assigned to the Workforce & OD Committee.
- **CONSIDER** the workforce risks in accordance with the Board request to identify any changes required to update the entries to reflect the current risk level facing the health board, and to consider the mitigating actions.

Governance and Assurance		
Link to Enabling Objectives <i>(please choose)</i>	Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities	
	Partnerships for Improving Health and Wellbeing	<input type="checkbox"/>
	Co-Production and Health Literacy	<input type="checkbox"/>
	Digitally Enabled Health and Wellbeing	<input type="checkbox"/>
	Deliver better care through excellent health and care services achieving the outcomes that matter most to people	
	Best Value Outcomes and High Quality Care	<input checked="" type="checkbox"/>
	Partnerships for Care	<input checked="" type="checkbox"/>
	Excellent Staff	<input checked="" type="checkbox"/>
	Digitally Enabled Care	<input checked="" type="checkbox"/>
Outstanding Research, Innovation, Education and Learning	<input checked="" type="checkbox"/>	
Health and Care Standards		
<i>(please choose)</i>	Staying Healthy	<input checked="" type="checkbox"/>
	Safe Care	<input checked="" type="checkbox"/>
	Effective Care	<input checked="" type="checkbox"/>
	Dignified Care	<input checked="" type="checkbox"/>
	Timely Care	<input checked="" type="checkbox"/>
	Individual Care	<input checked="" type="checkbox"/>
Staff and Resources	<input checked="" type="checkbox"/>	
Quality, Safety and Patient Experience		
Ensuring the organisation has robust risk management arrangements in place that ensure organisational risks are captured, assessed and mitigating actions are taken, is a key requisite to ensuring the quality, safety & experience of patients receiving care and staff working in the UHB.		
Financial Implications		
The risks outlined within this report have resource implications which are being addressed by the respective Executive Director leads and taken into consideration as part of the Board's IMTP processes.		
Legal Implications (including equality and diversity assessment)		
It is essential that the Board has robust arrangements in place to assess, capture and mitigate risks faced by the organisation, as failure to do so could have legal implications for the UHB.		
Staffing Implications		
All staff have a responsibility for promoting risk management, adhering to SBUHB policies and have a personal responsibility for patients' safety as well as their own and colleague's health and safety. Executive Directors/Unit Directors are requested to review their existing operational risks on Datix Risk Module to ensure SBUHB has an accurate and up to date risk profile.		
Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015)		
The HBRR and the Covid 19 risk register sets out the framework for how SBUHB will make an assessment of existing and future emerging risks, and how it will plan to manage and prepare for those risks.		
Report History	<ul style="list-style-type: none"> The last WODC risk report was received in April 2022. Risks in this report were received by the Management Board in June 2022, but refreshed since by Executive Directors during the month of July. 	
Appendices	<ul style="list-style-type: none"> Appendix 1 – Health Board Risk Register (HBRR) extract 	