

Date	Risk ID	Description	Rationale for consideration	Decision/commentary	Outcome
19/9/2018	3280	Failure to anticipate the possible "Brexit" outcomes	Escalated risk	The need for a risk assessment relating to Brexit was agreed at the IGRC meeting on the 23/8/2018, the risk was escalated accordingly	The Committee approved the escalation to the Strategic Risk Register
19/9/2018	3259	Estates and Facilities Service Delivery Model	Changing risk	The Committee agreed that the risk of service disruption resulting from Trade Unions balloting members to recommend the commencement of industrial action as a result of the Foundation Trust <b>considering</b> the delivery options for Estates and Facilities services, which will include the option of an Alternative Delivery Model should be reassessed.	Risk reassessed and closed as no longer appropriate. Risks 3282 and 3281 assessed
19/9/2018	3282	Alternative Delivery Model	New risk	The Committee agreed that the risk of service disruption resulting from Trade Unions balloting members to recommend the commencement of industrial action as a result of the Foundation Trust Board of Directors <b>approving</b> the decision to create a Wholly Owned Subsidiary for the provision of Estates and Facilities services should be managed on the Strategic Risk register	Risk accepted on to the strategic risk register
17/10/2018			Closure request	The Committee agreed that the risk should be closed until the outcome of the NHSI led 'pause' is confirmed and its implications understood.	Risk closed
19/9/2018	3281	Alternative Delivery Model-reputation	New risk	The risk of reputational damage as a result of the Foundation Trust progressing with the proposal to create a Wholly Owned Subsidiary to provide Estates and Facilities services was accepted onto the Strategic Risk Register	Risk accepted on to the strategic risk register
17/10/2018			Closure request	The Committee agreed that the risk should be closed until the outcome of the NHSI led 'pause' is confirmed and its implications understood.	Risk closed
19/9/2018	3057	Complaints process-Timeliness	Updated risk description and mitigation	The Committee reviewed the updated risk description and mitigation.	Changes were approved
19/9/2018	3222	Deterioration in the quality of care for stroke patients	Review	There is significant mitigation in place in relation to the conduct of and the achievement of the standards within the SSNAP audit, local data collection gives confidence that a sustained improvement is evident in the quality of care stroke patients receive. The SSNAP score published in August 2018 was a C. however it was decided not to alter the risk score until there was evidence of sustained change.	Risk reviewed
17/10/2018					
19/9/2018	3262	Maternity services reputational risk	Risk reviewed	Whilst there is no evidence of reputational damage in relation to this risk at the present time, the breach in duty of candour (in 2016) that the Trust has been prosecuted for will be attributed to maternity services and the Trust has not yet had any feedback from the formal review of the maternity service which was carried out by the CQC in Q1 2018/19. The Committee	There is a risk being managed divisionally relating to potential sub-optimal care of women and babies (1207)
17/10/2018					

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				agreed that the risk should remain on the strategic risk register	Risk score maintained
19/9/2018  17/10/2018	3270	EPR unknown queue	Risk reviewed	The committee agreed that this risk should remain on the strategic risk register it was recognised that patient harm could be caused where surgical and Non-Theatre Procedures are not booked because of incorrect mapping on CERNER EPR. A mitigation and recovery plan is in place, but it was agreed that corporate escalation was appropriate until the risk was resolved	
19/9/2018	3244	Integrity of patient records	Risk wording change	The risk title was changed due to the detailed risk assessment in relation to the integrity of patient records when there are a combination of clinical record keeping systems in use. It was decided that focusing purely on the scanning process was no longer a comprehensive approach to understanding the risk. (Previous risk title 'Risk associated with the management of the scanning of mini packs')	Risk wording changed and mitigation discussed
23/8/2018	3255	Collaboration with Airedale Foundation Trust	Updated mitigation	The mitigation in place, including the appointment of the stroke programme lead has reduced the risk associated with the collaboration	Mitigation updated
19/9/2018	3154	JAG Accreditation	Risk reviewed	There was a financial and reputational risk to the Trust following the deferral of JAG accreditation pending the completion of key actions for the Endoscopy unit being managed on the divisional risk register. JAG accreditation has not been achieved. It was agreed that now that this has been confirmed that this risk should be managed corporately. The Committee required an exception report to be provided to the Finance and Performance Committee in October. As a result this was also discussed from a patient safety and quality perspective at the October Quality Committee	Exception report received by Finance and Performance Committee 31/10.2018
17/10/2018	3278	Radiation doses to eyes for staff working with diagnostic x – rays.	Escalated risk	This risk was escalated by the Division of Surgery, Anaesthesia and Diagnostics following presentation of the risk at the Health and Safety Committee. There is a risk of Trust staff exceeding the new legal limit (2018) for radiation dose to their eye. This is specifically interventional radiology and cardiac catheter lab staff. The Committee agreed that this should be managed on the Strategic Risk Register	Risk accepted onto the strategic risk register
19/9/2018  17/10/2018	3288	Storage of clinical waste	Escalated risk  Risk reviewed	This risk was escalated to the strategic risk register. There is a risk that the Trust's management of clinical waste will be non-compliant with health care waste management legislation which will result in harm to patients, staff, reputation and the environment following the cessation of the external clinical waste management solution. The committee agreed that this risk should be managed on the strategic risk register.  The committee agreed that this risk should be reassessed and presented at the next committee as the contingency plans for	Risk accepted onto the strategic risk register  Risk to be re-assessed

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				clinical waste management are in place and regular auditing is not identifying any concerns with legislative compliance	
17/10/2018	3236	2018/19 Data quality in EPR impacting on income	Risk changed	The risk score was increased by the Committee as data input at source is still an issue, it has been identified that the central contributory factor to the risk is user error which is difficult to mitigate	Risk score increased
17/10/2018	3211	Cancer standards	Risk reviewed	The committee considered a summary of the increased mitigation in place, including the secondment of a senior manager to oversee the recovery plan, the required pathway reviews and the process of escalation.	Risk score maintained
17/10/2018		Nurse staffing risks	Profile of risks considered	The Committee requested a review of the grading and mitigation associated with nurse staffing risks, to be received for discussion at the November meeting	Review requested