

Date	Risk ID	Description	Rationale for consideration	Decision/commentary	Outcome
20/3/2019       17/4/2019	3050	One to one care in labour	Request to close the risk	<p>The Committee were reminded that the maternity service manage a risk associated with 1:1 care in labour on their divisional risk register and that this risk related specifically to the impact of obstetric theatre staffing. The Committee were informed that there has been an additional recruitment of scrub staff for labour ward theatre with only 1 vacancy remaining. This is mitigated by the increase in midwifery recruitment, but this meant that the closure should be deferred to the April meeting</p> <p>The Committee received and approved the proposal to close the risk from the Trust's strategic risk register as confirmation was received that staff were now in post and the risk, as assessed was fully mitigated. Any risk associated with theatre staffing on the labour ward should be managed and assured through routine Clinical Business Unit (CBU) governance processes.</p>	<p>The Committee deferred the decision to close the risk to the April Meeting.</p> <p>The Committee agreed the closure of the risk</p>
20/3/2019       17/4/2019	3236	Data quality and recording activity	Request to close the risk	<p>The Committee were informed that agreement has been reached with Commissioners regarding contract payment. In addition, corrections are being made to ensure income recording is not affected by data quality. The risk description was discussed, and the Committee agreed that a new risk assessment should be undertaken of the potential impact of data quality issues on income during 2019/20.</p> <p>The Committee received a risk assessment as requested, and as a result decided that, due to the nature of the controls in place, that the risk did not require escalation to be managed on the Strategic Risk Register, as the controls in place were now reflected in business as usual activity.</p>	<p>The Committee agreed the closure of the risk subject to a revised risk assessment being undertaken.</p> <p>The Committee did not require escalation of the newly assessed risk to the Strategic Risk Register</p>
20/3/2019       17/4/2019	3132	Divisional Clinical and non-clinical risk management	Request to close the risk	<p>The Committee were informed of the significant assurance opinion from internal audit in relation to the implementation of the risk management strategy across the Trust. It was suggested that the Committee considers closing this risk and requesting the assessment of a new risk that the positive changes that have occurred in divisional risk management may not be sustained as the organisation restructures in 2019/2020.</p> <p>The Committee received a risk assessment as requested, and as a result decided that, due to the nature of the controls in place, that the risk did not require escalation to be managed on the Strategic Risk Register, as the required controls were now reflected in business as usual activity of the Care Groups.</p>	<p>The Committee agreed the closure of the risk subject to a revised risk assessment being undertaken.</p> <p>The Committee did not require escalation of the newly assessed risk to the Strategic Risk Register</p>
20/3/2019	1271	Physical intervention training	Review of risk assessment methodology	The Committee approved the plan to close this risk and assess the impact across the whole spectrum of the management of patients who pose a risk (from conflict resolution to physical restraint) of issues identified in relation to training. The committee noted that this risk related to compliance with security management standards for Trusts	The Committee approved the plan to close this risk and reassess the risk across the whole spectrum (See risk ID 3378)

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17/4/2019	3378	The de-escalation of potentially violent situations and management of violent and aggressive patients	Newly assessed risk	<p>The Committee received a risk assessment following the escalation of a risk from the Health, Safety and Resilience Committee. The Committee discussed the nature and potential impact of the hazards identified during the assessment of this risk and the immediate steps being taken to mitigate those identified with the potential most severe impact. It was agreed that once these actions had been taken the current risk score would reduce, and this would be reflected in the risk that was presented to the Board of Directors.</p> <p>It was agreed to accept the risk on to the strategic risk register and the Committee acknowledged that a task and finish group had been established with a range of subject matter experts to ensure that effective steps were taken to rapidly mitigate the risk to an acceptable level.</p>	The Committee agreed that the risk should be escalated to and managed on the Strategic Risk Register
20/3/2019	2146	Safer Interventional procedure risk leading to patient harm	Request to close the risk	The Committee agreed that the risk should be closed from the strategic risk and a new risk related to the safety of invasive procedures outside of the theatre environment assessed in the context of the implementation of Local Safety Standards for Invasive Procedures (LocSSIPs).	The Committee agreed the closure of the risk subject to a revised risk assessment being undertaken (Risk ID 3370)
20/3/2019  17/4/2019	3370	Non-compliance with the safety standards for invasive procedures in a non-theatre environment	<p>Escalated risk from the Chief Medical Directors Office</p> <p>Risk reviewed</p>	<p>The Committee agreed the escalation of the risk relating to the safety of invasive procedures outside of the theatre environment to the Strategic Risk Register. (see risk 2156 above)</p> <p>The Committee were informed that a report would be provide to the Quality Committee at its meeting in April, and that the report would demonstrate that significant progress is being made in relation to the identified mitigation</p>	The Committee agreed that the risk should be escalated to and managed on the Strategic Risk Register
20/3/2019	3313	Replacement of equipment required for repatriation of the Tuberculosis testing service to BTHFT	Escalation of risk from the Division of Diagnostics, Anaesthesia and Surgery	It was noted by the Committee that the equipment required to address the risk in relation to the service (an autoclave) is at the top of the Capital Equipment list and that the risks to the current level of service provided by the Joint Venture Pathology Service using BTHFT equipment are being mitigated.	The Committee agreed to escalate this risk to the Strategic Risk Register until the equipment is in place
20/3/2019  17/4/2019	3288	Compliance with health care waste management legislation following cessation of external clinical waste management system	Risk reviewed	<p>The Committee were informed of a deterioration in the national incineration capacity and the renewed requirement to store waste for incineration. The Trust has defaulted to its original contingency plans, but has hired a refrigeration unit to support the anticipated increase in capacity required for the storage of anatomical waste. The Committee agreed that the risk score should be updated to reflect the deterioration in the national provision</p> <p>The Committee were again informed that the deterioration in the interim service continued and that storage of waste for incineration continued. Additional storage containers are now onsite, in addition to a specific refrigerated unit for anatomical waste. The situation in relation to Sharps was described as remaining particularly fragile and is being monitored on a daily basis. National escalation has been made through the EPRR route and routine Sit-reps are provided.</p>	The Committee agreed that an updated and increased risk score was appropriate

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20/3/2019	3301	Emergency care Standard performance	Risk re-assessed	The Committee reviewed the risk and it was agreed that this would be closed in April for the 2018/19 year and the risk to the Trust's achievement of this constitutional standard reassessed for 2019/20.	The Committee approved the plan to close this risk and reassess the risk for 2019/20
17/4/2019				The Committee reviewed the risk for 19/20 assessment and agreed that the risk should be escalated to be managed on the Trust's Strategic Risk Register.	The Committee agreed to escalate this risk to the Strategic Risk Register
20/3/2019	3068	Transport of Dangerous Goods Regulations 2009	Risk reviewed	Committee noted that the annual report showed some improvement in the Trust's compliance and the risk will be reassessed in light of the report. All the relevant sub-groups of the Health and Safety Committee are required to review the relevant transport regulations	
20/3/2019	3013	Cyber -security	Risk reviewed	There was no change in the risk score	The Committee requested a progress report at its April meeting
17/4/2019			Progress report received	The Committee received a progress report and was assured appropriate controls were in place.	
17/4/2019	3134	Management of Sharps	Request to Close the risk	The Committee received and approved the proposal to close the risk from the Trust's strategic risk register following the completion of the work of the task and finish group to mitigate the risk by establishing new and strengthening existing controls. The management of risk associated with the safe disposal of sharps will continue to be assured through the Health and Safety Committee.	The Committee approved the proposal to close this risk
17/4/2019	3110	Maintaining a safe and effective pathology service	Request to close the risk	The Committee received the proposal to de-escalate this risk and for it to be managed by the CBU. The Committee discussed the role of the CBU in relation to the Joint Venture Pathology Service, which is essentially to ensure satisfaction with service required, through established contractual processes. BG reported no specific intelligence in relation to problems with the service provided, although SS related some concerns from an IPCC perspective. As the CBU act as arbiters of the service and are involved in delivering the care it was agreed to de-escalate the risk from the Strategic Risk Register to be managed on the CMO risk register.	The Committee approved the plan to de-escalate the risk from the strategic risk register and for it to be managed on the Chief Medical Officer's risk register.
17/4/2019	3135	Proposal to close risk ID 3135 (Non-compliance with BRE (Cladding))	Request to close the risk	The Committee were informed that the work to ensure that the Cladding on the de-contamination block was compliant with the appropriate BRE standards was completed and the appropriate certification has been received and added to the Datix log as evidence. The Committee agreed that this specific risk should be closed from the Trust's risk register with the acknowledgement that the risks associated with fire prevention, detection and management are controlled through established processes, the assurance associated with which is presented to the Board of Directors annually.	The Committee approved the proposal to close this risk
17/4/2019	3293/ 2380	Vascular service: combined risk assessment	Risk review	The Committee were provided with an overview of the current risk associated with the vascular services, and agreed that the separate risks should be closed to enable a risk, combining the controls and addition mitigation from both, to be added to the	The Committee approved the proposal to combine these risks and for the combined risk to be managed on the Strategic Risk

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				Strategic risk register. The Committee acknowledged that new information had come to light since the risk assessment had been completed and a revised risk score would be calculated as it was entered onto the strategic risk register.	Register.
17/4/2019	3380	Mental health treatment	Escalated risk	The Committee were provided with an overview of the risk, which was identified through the work of the CQC Executive Mobilisation Committee. It was agreed that it should be escalated to the strategic risk register as requested.	The Committee agreed to escalate this risk to the Strategic Risk Register
17/4/2019	3374	Assessment of the risk associated with the impact of not achieving the specialist service specification for the Haemoglobinopathy service	Escalated risk	The Committee were updated on the progress of the formal risk assessment associated with the service. The risk is reflected on the Strategic Risk Register. The Committee were informed that the Rapid Response Review of the service would be likely to result in 'immediate concerns' and that the formal assessment of risk had been deferred until the report was available (due 18/4/2019). The Committee will be informed of the outcome at the meeting in May, in the meantime, any significant concerns identified will be escalated through the Executive Management team.	The Committee noted the escalation of this risk to the Strategic Risk Register
17/4/2019	2893	EPR benefits realisation	Changed risk score	The risk that there will be an inability to achieve the expected benefits realisation from EPR implementation affecting the organisation's financial position was reviewed by the Committee. The risk was described and the current controls and active mitigation were highlighted. The Committee approved the reduction in risk score and the change in mitigation date proposed.	The Committee agreed a risk score reduction.
17/4/2019	3250	Delivery of contractual obligations in the standard NHS Acute Contract	Change in risk score	The risk that the failure to deliver the obligations within the NHS standard acute contract will result in the application of financial penalties and/or the failure to recover planned income was considered by the Committee. The Committee noted that the agreement of a contract income position for 2018/19 together with the removal of the performance notices issues by the host Commissioner in relation to information & data have largely mitigated this risk for the year ending 31.3.19.	The Committee approved the reduction in risk score and that, as planned, the risk for 2018/19, as should be closed from the Strategic Risk Register and reassessed for 2019/20
17/4/2019	3251	Insufficient cash and liquidity	Changed risk score	The Committee considered the risk that the Trust has insufficient cash & liquidity resources to sustainably support the underlying Income & Expenditure run rate. The Committee were advised that the year- end cash position, as a result of the measures taken, is £21m. The figure is below the planned value of £28.4m as a result of the non-recurrent (non-cash measures) taken to support the Income & Expenditure position. The Committee were informed that the safe curtailment of the capital programme to protect the cash position has partially offset the impact of the non-recurrent measures.	The Committee approved the reduction in risk score and that, as planned, the risk for 2018/19, as should be closed from the Strategic Risk Register and reassessed for 2019/20
17/4/2019	2968	Delivery of Trust wide microbiology	Risk reviewed	The Committee considered the ongoing risk to the delivery of Trust-wide Microbiology Service due to inability to recruit to Consultant Microbiologist posts, since the retirement of two consultants in 2015 and 2016. The Committee agreed this risk required consideration and review in relation to the risk associated with the delivery of the	The Committee requested that the risk is considered in relation to risk 3369.



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				service in combination of the Care Group risk 3369.	
17/4/2019	3112	Non-Medical Appraisal	Risk reviewed	The Committee considered the risk of failing to ensure that all eligible non-medical staff have an appraisal. The Committee considered the discussion at previous meeting as to whether this risk should be closed, as the Trust achieved the target it set for itself in December 2019. The performance at 95% has not been sustained, although remains significantly improved from early 2018/19. It was agreed that the Care Groups (and corporate divisions) should assess their own risk, at CBU level, in relation effective delivery of appraisal and manage it at the appropriate level within their governance infrastructure.	The Committee will receive a paper at its May meeting in relation to the proposal for the assessment and management of this risk
17/4/2019	3294	Middle Grade staffing (Paediatrics)	Escalated divisional risk	This risk is being managed at care group level, however the Committee wanted to understand the potential of risk associated with middle grade staffing across the Trust. The Committee reviewed this risk assessment which was conducted on a Trust wide basis at the request of the Committee as a result of a risk assessment escalated from a specialty. The Committee agreed that the outcome of the risk assessment suggested that this was not a risk that should be managed as a strategic risk. It was proposed to present this risk assessment to the next Workforce and Education Sub-Committee to for assurance as this risk had previously been discussed there.	The Committee requested that the risk assessment is reviewed by the workforce and education sub-committee.
20/3/2019	3322	Turnaround time for stool samples	Risk escalated from the Division of Diagnostics, Anaesthesia and Surgery	The Committee reviewed the assessment of the impact of potential delayed turn-around of stool sample results on timely decision making around treatment modalities. The turn-around times identified in the risk assessment presented to the Committee were described as being within the accepted standard.	The Committee did not agree the escalation of the risk to the Strategic Risk Register.
20/3/2019	3326	Non-Replacement of Argon Laser	Risk escalated from the Division of Diagnostics, Anaesthesia and Surgery	The Committee reviewed the assessment of the impact of argon laser failure on service delivery, however it was understood by the Committee that approval for replacement had been given.	The Committee concluded that the purchase of a new laser should be confirmed prior to further consideration at the April Committee meeting.
20/3/2019	3316	Non replacement of the Ultrasound machine in the Early Pregnancy Assessment Unit (EPAU)	Risk escalated from the Division of Diagnostics, Anaesthesia and Surgery	The Committee reviewed the assessment of the impact of issues with the quality of ultrasound images and equipment failure on service delivery to patients in early stages of their pregnancy. It was understood by the Committee that purchase of a new ultrasound machine had been pushed down the Capital prioritisation programme. The Committee concluded that the risk assessment should be reviewed in the context of the impact and managed on the Divisional/Care Group risk register.	The Committee did not agree the escalation of the risk to the Strategic Risk Register.
20/3/2019	3369	Infectious Diseases / HIV / Microbiology Service	Risk escalated from the Division of Medicine and Integrated Care	The Committee reviewed the detailed risk assessment undertaken in relation to the Microbiology Service, agreed the current risk score of 20 and the escalation to the Strategic Risk	The Committee approved the escalation to the Strategic Risk Register

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17/4/2019				Register. It was agreed that the wording of the risk itself would be reviewed.  The Committee requested this risk was considered in relation to risk ID 2968	
17/4/2019	3294	On-call rota	Risk escalated from Unplanned Care Care Group	The Committee also considered the risk to patient care due to insufficient doctors available to provide a safe on call rota. 3 (of total 9) gaps on the middle grade rota until Feb 19) and requested an updated position to be provided to the Committee at its meeting in May	The Committee requested an updated position to be provided to at its meeting in May