

Date	Risk ID	Description	Rationale for consideration	Decision/commentary	Outcome
17/7/2019	3139	Lack of attendance at waste segregation training	Routine review of all risk associated with waste	The Committee requested a full review of all risks on the risk register in relation to the management of clinical waste	Risks to be reviewed and consolidated
17/7/2019	3203	Age and condition of aseptic production unit –	Routine review	The Committee was informed that a piece of work is being undertaken by Director of Pharmacy, on a wider business case, but that mitigation remains in place.	Routine review and escalation
17/7/2019	3253	Obstetric theatre ventilation routine inspection	Routine review	The Committee were informed that the mitigation plan remains in place which continues to progress.	Routine review and escalation
17/7/2019 21/8/2019	3316	Non replacement of the Ultrasound machine in the Early Pregnancy Assessment Unit	Routine review	The Committee were informed that the replacement equipment has been ordered and should be on site on the 1st August 2019 and operational by the 2nd August 2019.	Risk closed
17/7/2019	2893	EPR benefits realisation	Approval for closure from risk register	The Committee noted that the Major Projects Committee had received and noted the paper on reconciliation of the Electronic Patient Record (EPR) full business case financial benefits.	The Committee approved the closure of the risk
17/7/2019	3154	Joint Advisory Group on gastro-intestinal Endoscopy (JAG)	Review of care group risk	The Committee received a brief overview of the validation work that is taking place with patients with regard to their length of wait and clinical risk and prioritising them appropriately. Patients coming from the surveillance waiting lists were being screened for potential harm and the risk process is being undertaken and escalated through Datix and the Quality Oversight System.	Continuous review of risk through established review processes
17/7/2019	3222	Deterioration in the Quality of Service for Stroke Patients	Approval for closure from SRR	The Committee agreed following the recent [Jan- Mar 2019] SSNAP performance of B, the risk to be closed on the SRR but to remain on the CBU or Care Group risk register as the Improvement Group has achieved its objective of sustained improvement of SSNAP performance, but due to staffing challenges this needs to be still reviewed in terms of operational issues.	The risk to be managed on the CBU risk register
17/7/2019	3294	Inadequate Middle Grade Medical Staff in General Paediatrics.	Review of Care Group risk	The Committee were informed that the risk is being managed in a business as usual way and it was agreed that the level of risk should be reduced from 15 to 12. The Committee requested a risk assessment of the ED paediatric interface to be provided to the September Committee meeting	A risk specifically in relation to the ED/Paediatric interface to be assessed
21/8/2019	3057	Complaints Process timeliness	Closure of risk proposed	The Committee were assured by current progress, as reported on the integrated dashboard and agreed to the closure of the risk on the SRR but to remain on the Chief Nurse risk register for monitoring.	The risk was closed from the SRR and managed locally through the Chief Nurse's corporate office
21/8/2019	3417	Duplicate and confused electronic patient records	Escalated from care group/corporate directorate	A risk assessment and analysis has been undertaken into the issues arising from duplicate and confused electronic patient records. The current mitigation has had little impact on the risk and there have been an increase in numbers for both confused and duplicate records. The committee agreed to add the risk to the SRR but requested sight of the risk assessment.	The full risk assessment to be reviewed to enable the mitigation
21/8/2019	3046	Software Licensing – score increased.	Increase in risk score	The Committee were informed that additional mitigation had been put in place and the logout time has been reduced. Work ongoing with admin and secretaries to see if we can reduce the number of EPR licences we are using.	The Committee requested that the mitigation on the risk register was updated
21/8/2019	3211	Cancer Standards - score reduced.	Reduced risk score	The Committee were fully sighted through the Integrated dashboard and detailed reports received by the Finance and Performance Committee that cancer performance continues to improve in overall waiting times, waiting list and backlog. Breach reviews have not indicated any patient harm as a result	The Committee approved the reduction in risk score

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				of not meeting the cancer waiting times.	
	3380	The Impact on BTHFT of the NCEPOD guidance "Treat as one".	Risk score increased	The Committee were informed of additional mitigation being put in place, for instance that a staff member had been seconded to help on a part time basis. In addition a business case been developed to consider substantive post holder which has been agreed. Despite the mitigation in place the Trust is experiencing challenges in delivering its Mental Health Strategy.	The Committee approved the increase in risk score and noted an update will be provided to the Quality Committee in October