

## High Level Risk Movement Log

Report date	13/12/2022
Prepared by	Sheridan Osbourne
Prepared for	Academies 14/12/2022

Rating
15 to 25 Extreme
8 to 12 - High
4 to 6 - Moderate
1 to 3 - Low

Definitions	
Rating (initial)	The risk score at the time of entering the risk onto the risk register
Rating (residual)	The risk that is expected to remain once all actions detailed in the risk treatment plan have been completed

NEW RISKS TO HIGH LEVEL RISK REGISTER											
ID	Date of entry	Assuring Academy	Description	Lead director	Risk lead	Rating (initial)	Summary of mitigation	Target date for mitigation completion	Action plan lead	Current Rating	Rating (Residual)
3816	24/11/2022	People	Due to the sheer workload being delivered by the consultant medical staff within O+G, there is a significant burden of sessions being delivered on top of job planned activity. At times we are struggling to cover acute clinical sessions in Obstetrics and acute Gynaecology. 3 consultant gaps currently contributing to the issues: <ul style="list-style-type: none"> <li>Gynae oncology lead appointed but still not in post</li> <li>Funded Obstetric only consultant post not been successful in recruiting to</li> <li>Locum consultant within the unit achieved a substantive post due to a colleague leaving-locum remains empty and recent round of recruitment – only x1 applicant who was not suitable for interview</li> </ul>	Smith, Dr Ray	Robertson, Carolyn	15	<ol style="list-style-type: none"> <li>Cover acute service and insert hot Gynae weeks into rolling consultant rota which is currently being delivered as extra to job plans</li> <li>Include Gynae hot weeks in the job plans and ensure no clinical session affected by OOH on call work and required rest time</li> <li>Confirm a start date with HR for the Gynaecology Oncology Lead</li> <li>Stop use of Medinet for Gynaecology Clinics due to poor patient experience and concerns regarding clinical safety but this will not improve the waiting list (separate risk assessment required)</li> <li>Advertise for Obstetric only consultant with Maternal Medicine interest</li> <li>Allow Workload to grow for non -urgent Gynaecology waiting lists which will allow the acute to be covered within existing job plans</li> <li>Further discussions with the trust regarding local pay rates v BMA rate for extra sessions worked as this will increase the pickup extra work by the existing consultant body.</li> </ol>	31/03/2023	Robertson, Carolyn	15	5

HIGH LEVEL RISKS THAT HAVE CHANGED IN SCORE											
ID	Date of entry	Assuring Academy	Description	Lead director	Risk lead	Rating (initial)	Summary of mitigation	Target date for mitigation completion	Action plan lead	Current Rating	Previous Rating
			no risks changed in score during the period 18.11.22-8.12.22								

HIGH LEVEL RISKS THAT HAVE BEEN REMOVED/CLOSED											
ID	Date of entry	Assuring Academy	Description	Lead director	Risk lead	Rating (initial)	Summary of mitigation	Target date for mitigation completion	Action plan lead	Current Rating	Residual Rating
3801	23/09/2022	Finance and Performance	<p>Limited access to the Gastro Olympus ERCP Stack systems which are both being used outside of service agreement and are unreliable. Olympus stacks are the equipment that is needed to provide any endoscopic procedure. They power the scopes and provide the images. A stack is integral to the provision of all endoscopic procedures and a stack is required in each room for every procedure on a list. The scopes are changed between patients depending on the nature of the procedure. The Endoscopy Unit needs 8 working stacks to provide for the lists in the 6 endoscopy rooms plus the ERCP lists and the theatre lists including emergency GI bleeding.</p> <p>One Olympus Stack system used in the ERCP room is obsolete and unusable. The system is not repairable and out of service agreement. The Olympus Stack system currently being used is borrowed from another room, but is reliant on that room not being used at the time. ERCP is a highly specialised service that is only available within acute hospital trusts and some procedures performed on the ERCP list eg stenting are referred by other trusts</p> <p>A second Olympus Stack system in theatres, which is used for emergency bleeding and endoscopic procedures requiring GA, is also out of contract and intermittently faulty. This is not ideal in an emergency or GA situations and has already caused issues during an emergency procedures.</p> <p>The trust offers a regional luminal stenting service</p>	Azeb, Sajid	Jowett, Dr Sarah	15	<p>05/12/2022 - The new stacks are in the trust and with medical physics department waiting to be checked and installed.</p> <p>17/11/2022 New stacks have been purchased - staff are being trained on the new equipment currently.</p> <p>12/10/2022 - Purchase Endoscopy Stacks that were approved at ETM 26 September.</p> <p>Replacement of both stack systems.</p>	31/12/2022	Jowett, Dr Sarah	15	1

HIGH LEVEL RISKS THAT HAVE PASSED THEIR REVIEW DATE											
ID	Date of entry	Assuring Academy	Description	Lead director	Risk lead	Rating (initial)	Summary of mitigation	Target date for mitigation completion	Action plan lead	Current Rating	Review Date
			none								