

NHS Shetland

Meeting:	Shetland NHS Board
Meeting date:	25 April 2023
Title:	Strategic Risk Register Report
Agenda reference:	Board Paper 2023/24/05
Responsible Executive/Non-Executive:	Kirsty Brightwell, Medical Director / Michael Dickson, Chief Executive
Report Author:	Edna Mary Watson, Chief Nurse (Corporate)

1 Purpose

The Strategic Risk Register is formally reported to the NHS Board for

- Awareness and
- Decision

having been formally considered at the Risk Management Group on 8 March and Audit Committee on 28 March 2023.

This report relates to:

- NHS Board Governance Procedures

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

2 Report summary

2.1 Situation

The strategic risks were reviewed at the Risk Management Group (RMG) meetings in June, September, November 2022 and March 2023.

Changes made to the Strategic Risk Register in terms of new and closed risks, and changes in risk scores and risk responses are outlined in the paper.

In addition new sections on Procedures developed, Proposals presented and Horizon Scanning have been added to assist with the sharing of key information from RMG to the Audit Committee and subsequently the NHS Board.

2.2 Background

As part of the review of the risk management strategy in 2021/22 the following changes were made:

- corporate risks renamed to strategic risks;
- adopted a new risk description format in line with the orange book and to help ensure we have clear and consistent risk descriptions:-
 - If.... (the cause of the risk)
 - Then.... (the event/incident)
 - Resulting in.... (the consequence)
- added 'reason for change' field and 'date risk reviewed' onto the risk form thus enabling SRR reports to identify why changes have been made to the relevant groups, committees and Board risks;
- agreed risk title to be used in reports and for communicating the strategic risks within the organisation.

Executive Directors have been supported to review the risks they are responsible for in line with the above format and work continues to support line managers throughout the organisation to review their risks and implement this format.

The Datix Support Officer and other members of the Clinical Governance and Risk Team continue to support staff with the identification, recording and management of risks across the organisation.

2.3 Assessment

Key changes made to the Strategic Risk Register includes:

- For ease of reference the Strategic, Organisational, Directorate and Highest Rank table are now all displayed on one spreadsheet, see Appendix 1. Further work has now been undertaken with the Chair's of the respective Governance Committees to look at a new format for reporting of the Strategic Risk Register to enhance accessibility of the information. The new format will go live with the first reports to the respective Committees from 1 May 2023;
- To enhance governance processes a new field entitled "updates from governance committees" has been added to the SRR enabling the easy recording of when governance groups reviewed their strategic risks and any changes made / proposed;
- A draft, read-only version of a new dashboard has been added to Datix which contains all the strategic, directorate, and organisational risks. This dashboard can be viewed by anyone with a Datix account and should address the concerns of risks not being visible across the organisation;
- Only 3 out of the 18 risk descriptions remain to be updated into the new format and this is currently being progressed;
- New controls were added to the Finance risk;
- SR01, relating to national standards has now been reviewed.

- Two organisational risks have been added to the register, both are medium risk and both marked as “tolerate. These risks relate to professional registrations being out of date and the risk of meeting Treatment Time Guarantees (TTGs) during remobilisation.
- There are two directorate-approved “high” risks with a risk score of 16, one about access to out-hours-services, and one about challenges in medical staffing;
- The risk form, which is now in use across the organisation, includes a “feedback section”, so users can make suggestions directly to Clinical Governance; and
- Clinical Governance and Risk Team Leader and the Datix Systems Officer will work on the process of managing risks, linking all departmental risks to organisational or directorate risks over the coming months. This work will also include standardising the format and timing of risk reviews to the end of a month in order to make this process more manageable, thus ensuring that more timely reviews are conducted going forward.

New Risks

Following the previous agreement at RMG that the Director of Community Health and Social Care (DCHSC) should work with Mental Health management to establish a new directorate risk, outlining the interplay between workforce pressures and clinical governance concerns, the DCHSC presented a draft risk for consideration.

It was noted that the risk as expressed was quite broad in nature with concerns raised regarding the knowledge or ability of the service to take actions forward to mitigate the risk based on it’s current wording. Some suggestions were made regarding alternative wording to break down the risk into areas of staffing, recruitment and ways of working. It was also recommended to check the links between this Directorate level risk with the Departmental Risk Register. Risk to be re-presented to RMG following suggested revision.

Closed Risks

No risks were closed in this last quarter.

Changes in Risk Scores

The following changes were made in relation to risk scores:

Finance (SR02) – risk level increased by 4 points from 16 (high risk) to 20 (very high risk) to reflect the ongoing overspend in relation to the continued used of high cost locum staffing to cover vacancies in key posts;

Planning / Contingency (SR13) – risk level increased by 4 points from 12 (high risk) to 16 (high risk) to reflect the increasing challenge in access to services across both acute and CHSCP services;

Workforce (SR08) – risk level remains at 16 (high risk) due to the ongoing challenges faced in relation to recruitment and retention of staff;

Covid Outbreak (SR16) – risk level increased by 4 points from 12 (high risk) to 16 (high risk) to reflect that although the risk is being managed there are some vulnerabilities in the controls in terms of small teams and vacancies;

Flu Pandemic (SR19) – risk level increased from 5 (medium risk) to 10 (high risk) in light of the vulnerabilities noted in the Health Protection response as outlined above.

Changes in Risk Responses

No changes were made to risk responses.

Procedures

No new procedures were considered this quarter. A plan to review the approach to the use of the Clinical Risk Advisory Team (CRAT) procedure was discussed. RMG agreed that this should be reviewed locally now as the national review was unlikely to report for another 18 months. It was also noted that there were 5 Adverse Events since October where the CRAT procedure had been used. However, none of these, had yet reached the final report stage where the lessons learnt and any additional considerations for risk management could be considered.

Proposals

Following the DCHSC proposal to change the system by which CHSC Directorate risks are recorded from being recorded on both the Datix system (NHS) and the JCAD system (SIC) to using the JCAD system only for CHSC Directorate risks, RMG received their first report.

It was noted that there were a number of areas that required further consideration:

- Differences in Risk Rating Scale – potentially leading to different Risk Ratings for the risk whether assessing using NHS or JCAD Risk Matrix;
- Risk Description format is not as per the NHS Risk Management Strategy which promotes the use of the IF (cause of risk)... THEN (event/incident)... RESULTING IN (Consequence);
- Review Timescales – clarification needed as to whether there is a consistent approach to review timescales based on level of risk;
- Visibility of risks – how to ensure that there is visibility and linkages between the Directorate risks held on JCAD and the Departmental, Organisational and Strategic Risk Registers held on the Datix Risk system.

Following discussion, the Audit Committee advised that they wished the risks to continue to be held on the NHS Datix system in order that the NHS Board had continued oversight of these risks. Audit Committee decision to be fed back to the Director of Community Health and Social Care.

Horizon Scanning Risk Discussions

No new risks were identified but it was confirmed that there was a need to progress actions in relation to those noted below:

- National Care Services;
- Cost of Living Crisis – potential impact of the current cost-of-living crisis on the NHS workforce, and how it may affect service delivery;
- Strategic Winter 2022 risk about the particular pressures facing NHS Shetland, incorporating the potential for illness-related staff shortages; consequences of the cost of living crisis, power cuts/outages;

- Programme Risks, how to best record various risks associated with a single programme – eg vaccination or screening. Dr Laidlaw confirmed that she was progressing this risk.

2.3.1 Quality/ Patient Care

Effective risk management is a key component of ensuring patient safety by contributing to improving the reliability and safety of everyday health care systems and processes.

2.3.2 Workforce

Effective management of risk is key to ensuring staff work in a safe environment. The risk assessments recorded on Datix have universal application across NHS Shetland, other NHS Boards as well as including staff working within the Community Health and Social Care Partnership, and as a consequence, affect all groups.

2.3.3 Financial

There are no direct financial consequences of this paper. However, where improvements in practice, or to address gaps in controls, are required there may be associated financial costs. These are managed through the department/area either where the issue arose or by those responding to the issue eg health and safety, estates dept or would be escalated if it was a significant cost.

2.3.4 Risk Assessment/Management

The Executive Director reviews their strategic risks prior to each RMG and the full strategic risk register is presented at each RMG meeting. If new strategic risks are identified these are also included at RMG for review and agreement to be included on the risk register.

Risk Assessment and Management is undertaken in line with Healthcare Improvement Scotland (HIS) Risk Management Framework which incorporates the NHS Scotland 5x5 Risk Assessment Matrix.

2.3.5 Equality and Diversity, including health inequalities

The Board is committed to managing exposure to risk and thereby protecting the health, safety and welfare of everyone - whatever their race, gender, disability, age, work pattern, sexual orientation, transgender, religion or beliefs - who provides or receives a service to/from NHS Shetland.

The Equality and Diversity Impact Assessment Tool has been completed for the Risk Management Strategy.

2.3.6 Other impacts

There are no other impacts to note.

2.3.7 Communication, involvement, engagement and consultation

The SRR is an internal document therefore no engagement with external stakeholders has been undertaken. There has been regular communication and involvement in the development and review of the risks with Heads of Departments, relevant topic specialists eg Health and Safety, and with the Executive Directors both on an individual level and corporately when formally meeting as RMG. Dates of RMG meetings are noted in the section below.

2.3.8 Route to the Meeting

The Strategic Risk Register has been considered by RMG at its meetings held on 29 June, 7 September, 9 November 2022 and 15 March 2023. The Audit Committee has also reviewed the Risk Register at its scheduled meetings on 16 June, 27 September, 29 November 2022 and 28 March 2023. Any amendments or actions proposed at each meeting has been followed up either by the respective Director or by the Chief Nurse (Corporate) and / or Clinical Governance and Risk team, as appropriate.

2.4 Recommendation

The Strategic Risk Register is formally reported to the NHS Board for

- Awareness and
- Decision

having been formally considered at the Risk Management Group on 8 March and Audit Committee on 28 March 2023.

3 List of appendices

The following appendices are included with this report:

- Appendix No1, Strategic Risk Register