

# TRUST RISK REGISTER

July 07

Appendix 2

Key: Red =15 & above Amber = 7-14 Green = 6 & under

Directorate	Department	Lead Director	Description of risk	Date entered	(probabilityxseverity)	Risk rating	Controls in place/Assurance	Review date
<b>Nursing and Clinical Development</b>	Litigation	Deborah Wheeler	Claim of £500k or above due to injury caused by failure to control Claimants INR level.	May-07	(4x5)	20	With NHSLA. Trust action plan completed including change of SOP in labortary and escalation of abnormal result to relevant Consultant.	Sep-07
<b>Facilities</b>	Estates	Phil lent	Emergency generator failure	Jun-07	(4x5)	20	Regular testing of emergency power supplies in accordance with HTM.	Jun-08
<b>Facilities</b>	Estates	Phil lent	Failure of negative flow pressure rooms	Jun-07	(4x4)	16	Negative air flow rooms under day-to-day management of users. Operation and maintenance placed on estates PPMs.	Jun-08
<b>Facilities</b>	Estates	Phil lent	Failure of fire alarm/ protection systems.	Jun-07	(5x3)	15	Planned maintenance systems in place and maintenance contracts in place to monitor and manage fire alarm systems. Monitored through the Fire Safety Committee.	Jun-08
<b>Finance</b>		Richard Martin	Savings programme of £8.4 million is not achieved	May-07	(5x3)	15	Detailed plans to extract savings. Internal monitoring including use of the DH productivity matrix	Monthly
<b>IM&amp;T</b>	Medical records	Glenn Winteringham	Health records library	Jun-07	(3x5)	15	Health and safety risk associated with no space and file casenotes, so they are stored on boxes, in bags, on desks.	Nov-07
<b>IM&amp;T</b>	Medical records	Glenn Winteringham	Lack of availability if medical records	Jun-07	(3x5)	15	Paper to April 07 HMB set out the multiple causes and action plan. Medical Committee updated June 07. Aims to :- 1.Appoint new Health Records Manager in July 07,2. Mandate use of case note tracking by Aug 07,3. Relocate medical records library to fit for purpose space by Nov 07.	Nov-07
<b>Nursing and Clinical Development</b>	Risk Management	Deborah Wheeler	Delay in reporting of incidents	May-07	(4x3)	12	Trust Policy.Reporting times monitored through Clinical Risk and Health and Safety Committee	Dec-07

<b>Nursing and Clinical Development</b>	Patient Relations	Deborah Wheeler	Rise in number of complaints	May-07	(4x3)	12	Formal follow up of action plans. Monitored through Clinical Governance Steering Cmte, Hospital Management Board, Trust Board	Dec-07
<b>Nursing and Clinical Development</b>		Deborah Wheeler	Failure to reduce HCAI rates	May-07	(4x3)	12	Infection control rates monitored through Infection Control Committee, Clinical Governance committee	Sep-07
<b>Operations</b>		Kate Slemeck	Failure to meet interim trajectory for 18 weeks.	May-07	(4x3)	12	Trust in negotiations with PCTs to agree activity levels in line with 18 wk implementation. PTL monitoring in place including data validation and escalation policy. Project plans available and risk assessed. Pathway mapping work in all divisions underway.	Monthly
<b>Facilities</b>	TSSU	Phil lent	The decontamination facility is at risk due to poor condition and environment	May-07	(4x3)	12	Good quality management and SOPs. Support from Senior team. Close control and liaison with theatres and other users. Monitored through Decontamination Cmte.	Jun-08
<b>Operations</b>		Kate Slemeck	Letters dictated in clinic not being transcribed and sent to relevant GPs/Hospitals.	May-07	(4x3)	12	Clinical turnaround times for letters-escalation is through Team Leaders and Service managers if failing to meet the target of 7 days. Team Leaders to monitor performance through spot audits.	Monthly
<b>Operations</b>	Maternity	Kate Slemeck	Risk of inaccurate data collection due to outdated IT systems within maternity	Nov-06	(3x4)	12	Monitoring of data accuracy	Jan-08
<b>Operations</b>	Maternity-Labour ward	Kate Slemeck	Not implementing perinatal mental health recommendations from CEMACH/CISH reports.	Jun-06	(3x4)	12	Islington/Haringey PCT mental health care pathways.	Jan-08

<b>Operations</b>	Diagnostics	Kate Slemeck	Delay in treatment/action following an abnormal x-ray/scan	May-07	(3x4)	12	New electronic reporting system to be implemented Sept 07 with potential to alert clinicians of abnormal result. Electronic distribution of reports with hard copy sent to requesting clinicians. Continuous audit of unreported and reported films in operation. NPSA guidance on informing patients being implemented. Urgent chest referral pathway for all potential lung cancers in operation.	Apr-07
<b>Facilities</b>	Estates	Phil Ient	Failure to internal electricity supply	Jun-07	(3x4)	12	Electrical systems and component parts on planned maintenance and backlog replacement programme.	Jun-08
<b>Facilities</b>	Estates	Phil Ient	Failure to deliver hard FM service through PFI.	Jun-07	(3x4)	12	Monitoring mechanism set up to check and verify hard service provider reports. Monthly performance review meeting held to discuss reports. Reported to Liaison Committee and Trust Board.	Jun-08
<b>Operations</b>	Maternity-Labour ward	Kate Slemeck	Inadequate staffing levels/skill mix for women requiring high dependency care. (CEMACH, NCEPOD reports)	Jan-06	(3x4)	12	Birthrate plus audit, contingency plan based on results. Internal audit. Business case for additional midwives approved on 4/7/07 for 14 midwives this year and 5 in April 08.	Jan-08
<b>Operations</b>	Diagnostics	Kate Slemeck	Delay in treatment/action following an abnormal blood result	May-07	(3x4)	12	Paediatric department have introduced monitoring system. Lab SOP have been changed to highlight the need for contacting the requesting Dr and Consultant if abnormal result.	Apr-07
<b>Operations</b>		Kate Slemeck	PCT demand management initiatives cause a demand and capacity mismatch	May-07	(5x2)	10	Trust working with PCTs on demand management plans. A protocol for flexing capacity in line with changes to demand in under development.	Monthly

<b>Facilities</b>	Catering	Phil lent	Failure to provide food preparation & provision.	Jun-07	(2x5)	10	Robust policies and procedures in place for the production and delivery of staff and patient catering. Service monitored through the food and Environmental Hygiene group.	Jun-08
<b>Facilities</b>	Estates	Phil lent	Medical gases/ piped systems failure.	Jun-07	(2x5)	10	Piped gas systems maintained in accordance with the HTM.	Jun-08
<b>Facilities</b>	Medical physics	Phil lent	Failure to deliver comprehensive service	Jun-07	(2x5)	10	Service review completed April 07 and considered robust and adequate for the coming year.	Jun-08
<b>Nursing and Clinical Development</b>	Risk Management	Deborah Wheeler	Risk of high number of patient falls	May-07	(3x3)	9	Trust Policy. Training. Monitored through Clinical Risk Cmte	Dec-07
<b>Nursing and Clinical Development</b>		Deborah Wheeler	High number of sharps injuries to staff	May-07	(3x3)	9	Trust Policy. Training. Monitored through Clinical Risk and Infection Control Cmte.	Sep-07
<b>Facilities</b>	SSD	Phil lent	Sterilisers/CSSD Failure	Jun-07	(3x3)	9	Good quality management and SOPs. Support from Senior team. Close control and liaison with theatres and other users. Decontamination Committee.	Jun-08
<b>Operations</b>	Medical Records	Kate Slemeck	The risk of patients with duplicate medical records	May-07	(3x3)	9	Reinforcement of PAS procedures via team leaders	Dec-07
<b>Human Resources</b>		Margaret Boltwood	Risk of a shortage of junior doctors in post	May-07	(3x3)	9	ET monitoring NMC position for Trust. Plans in place for recruitment of local and bank doctors	Sep-07
<b>Human Resources</b>		Margaret Boltwood	Failure to implement ESR effectively	May-07	(3x3)	9	PID will be in place and steering group. Resources in place to support delivery.	Sep-07
<b>Facilities</b>	Procurement	Phil lent	Risk of failure of suppliers software (EROS)	Jun-07	(3x3)	9	EROS system externally hosted through Trust Intranet.	Jun-08

<b>Facilities</b>	Estates	Phil lent	Failure to heating systems	Jun-07 (4x2)	8	Heating and component parts on planned maintenance and backlog replacement programme.	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	Risk of failure of hospital information system (total CARE, PAS, A&E Maternity theatres)	Jun-07 (4x2)	8	Needs to be deleted and a separate score for each system. There are no systems	Jun-08
<b>Operations</b>		Kate Slemeck	Patients from a clinical speciality that we do not offer on site having to be transferred urgently	May-07 (4x2)	8	Bed management policy. Policies on transferring to other centres.	Apr-08
<b>Nursing and Clinical Development</b>	Risk Management	Deborah Wheeler	Risk of incorrect identification of patient receiving blood transfusion.	May-07 (2x4)	8	Trust policy. Training in place. Monitored through Hospital Transfusion Committee and audit	Mar-08
<b>Nursing and Clinical Development</b>		Deborah Wheeler	Risk of not managing SUI's in an acceptable time frame	May-07 (2x4)	8	Policy and process in place. Monitored through Trust Board and assurance Cmte	Sep-07
<b>Facilities</b>	Estates	Phil lent	Failure to steam supply	Jun-07 (2x4)	8	Steam systems and component parts on planned maintenance and backlog replacement programme.	Jun-08
<b>Facilities</b>	Housekeeping	Phil lent	Failure to deliver a clean hospital.	Jun-07 (2x4)	8	Policies and procedures in place. Internal audit and reporting through the Food and Environmental Hygiene Group and the Infection Control	Jun-08
<b>Facilities</b>	Procurement	Phil lent	Failure of suppliers of goods including maintenance services	Jun-07 (2x4)	8	Likelihood of all suppliers failing considered low. Networking and product analysis undertaken on an as required basis. Monitored through the Procurement Plus Group.	Jun-08
<b>Facilities</b>	Switchboard	Phil lent	failure to provide switchboard service.	Jun-07 (2x4)	8	Soft' service only provided. Equipment operated and maintained by IM&T. Staff rosters and cover arrangements reviewed annually and considered	Jun-08
<b>Facilities</b>	Medical physics	Phil lent	Medical equipment inventory needs to be kept up-to-date	Jun-07 (2x4)	8	New software system installed and running. Inventory and database in place from June-07.	Jun-08

<b>IM&amp;T</b>	Medical Records	Glenn Winteringham	Lack of availability of medical records	May-07	(3x2)	6	New IT system being implemented to improve case note tracking September 2007.	Dec-07
<b>Operations</b>		Kate Slemeck	Impact on bed capacity due to delayed transfers of care	May-07	(3x2)	6	Active bed discharge team supported by discharge policy. Medical rota bolstered around bank holidays/long weekends	Apr-08
<b>Facilities</b>		Phil Ient	Risk of ligature points throughout the Trust as identified in the CISH report	May-07	(3x2)	6	Risk of ligature with mental health patients considered only and therefore ligature points in secure rooms in ED checked.	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	Failure EGATE interface services	Jun-07	(3x2)	6	Market leading product running on modern hardware.	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	Failure of email (Group wise)	Jun-07	(3x2)	6	E-mail users now split over two servers.	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	Failure of local area network(LAN)	Jun-07	(3x2)	6	New network installed in PFI build, and all other network switches replaced + 2 new	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	Failure of site on-call system	Jun-07	(3x2)	6	Not clear what this means, presuming IT on-call, which is run on an informal basis.	Jun-08
<b>Nursing and Clinical Development</b>		Deborah Wheeler	Management of controlled drugs	May-07	(2x3)	6	Trust Policy. Training. Audit by pharmacy. Monitored through Clinical Risk Cmte	Sep-07
<b>Facilities</b>	Estates	Phil Ient	Failure to manage PFI contract	Jun-07	(2x3)	6	to check and verify hard service provider reports. Monthly performance review meeting held to discuss reports. Reported to Liaison Committee and Trust Board.	Jun-08

<b>Operations</b>		Kate Slemeck	Management of missing patients	May-07	(2x3)	6	Missing person protocol in operation. Reinforced with incident reports.	Apr-08
<b>Nursing and Clinical Development</b>	Risk Management	Deborah Wheeler	Risk of patients being harmed by staff not adhering to NPSA guidelines on NG tube checking	May-07	(2x3)	6	Trust Policy. Training. Monitored through Clinical Audit and Clinical Risk Cmte	Dec-07
<b>Facilities</b>	Estates	Phil lent	Failure of lifts/ escalators	Jun-07	(2x3)	6	Lifts and escalators on planned and contract maintenance.	Jun-08
<b>Facilities</b>	Security	Phil lent	failure to CCTV and access control system	Jun-07	(2x3)	6	CCTV and access control systems on service contracts. New Security Services Manager starts in July and will take over day-to-day	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	PABX failure	Jun-07	(5x1)	5	Backup processor in place should primary processor fail + 8 hour battery back up in the event of power failure.	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	Failure of user security, directory file and print services (NDS, ADS)	Jun-07	(5x1)	5	New storage area network (SAN) installed with significant resilience built in + multiple failover servers in place for both NDS and ADS.	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	Bleep system failure	Jun-07	(4x1)	4	new bleep system implemented 2005+ option to use radio pagers and mobile phones as back up sin key areas.	Jun-08
<b>Facilities</b>	Facilities	Phil lent	Risk of failure to planet FM system	Jun-07	(2x2)	4	Planet FM system on maintenance agreement and on the Trust IT systems. Regular	Jun-08
<b>Facilities</b>	Portering	Phil lent	Failure to portering system (CARP)	Jun-07	(2x2)	4	CARPS system on maintenance agreement and on the Trust IT systems. Regular backups maintain integrity of data.	Jun-08
<b>IM&amp;T</b>		Glenn Winteringham	Risk of failure of Whittington information system(WIS)	Jun-07	(2x2)	4	Backed up on a daily basis and should be readily restored.	Jun-08

