Appendix 1

Risk Registers

What is a Risk Register?

A Risk Register is a log of risks of all kinds that threaten the delivery of objectives and the delivery of services. It should be a ‘live’ document which is populated through the risk assessment and evaluation process. Risk Registers should operate at all levels of Northumberland, Tyne and Wear NHS Foundation Trust (the Trust / NTW) – at local ward / department level, major projects and programmes and at Directorate, Group and Corporate level.

Why do we have Risk Registers?

Risk Registers are a valuable tool to assist the Trust in:

- Providing evidence, if required, that the Trust is compliant with the Management of Health and Safety Regulations 1999;
- Providing a comprehensive database of recognised risks, which have the propensity to cause harm to patients, staff or the public and/or threaten achievement of the Trust’s aims and objectives;
- Enabling all significant risks to be prioritised, monitored and reviewed, as part of the Trust’s risk management system;
- Identifying and addressing significant development needs;
- Identifying and addressing processes or systems which require review.

Are all types of risk included on Risk Registers?

Yes, with the exception of risks relating to individual service users.

- **Strategic Risks**

  Strategic risks that could threaten the achievement of the Trust’s strategic objectives will be included on the Trust’s Corporate Risk Register. Strategic risks relating to Groups should also be included in their Risk Registers. Where a specific Service has long term strategic objectives, relevant risks can also be included in their Risk Registers.

- **Operational risks**

  Operational risks are generally more day to day risks relating to the ongoing operation of services. It would be expected that Local Ward and Department Risk Registers would comprise mostly operational risks; some operational risks will best be managed at directorate level, and some may require to be escalated via the Group through to the Corporate Risk Register.
- **Clinical risks**
  Although clinical risks relating to individual service users should not be included in risk registers, generic clinically related risks should be included. Examples of this could be risks relating to care coordination planning, risks relating to medical devices or risks relating to effective monitoring of all patients’ physical health on a ward.

- **Environmental risks**
  Risks could be related to the environment within which a clinical service is being provided or general environmental risks relating to the Trust’s estate.

- **Audit studies and Internal / External Assessments**
  Significant risks may be identified as a result of any internal or external audit; external inspections e.g. by the Care Quality Commission; patient and staff surveys etc.

- **Workforce**
  Workforce related risks should be considered at all levels in the organisation.

- **Incident Reports**
  It is often apparent from an adverse incident, or subsequent investigation, that there is a significant risk which needs to be managed.

- **Health and Safety Risk Assessments**
  Health and Safety Risk Assessments are a legal obligation for the Trust, and managers are responsible for ensuring these assessments are undertaken. Any significant risk identified from these assessments should be included on the Risk Register.

In summary, risks can be identified from a large number of sources. Section 7 of the Policy provides further examples of potential sources for identifying risks.

**How much information is included on the Register?**

Risk Register Templates and the electronic Safeguard Risk Management System may include the following information:

- A Reference Number;
- Source of Risk;
- Date identified and added to Register;
- Summary risk description;
- Summary action plan;
- Area affected (this might be a specific specialty/division/Trust-wide);
- Risk rating (impact x likelihood);
- Residual risk and effectiveness of control measures;
- Cost of implementing action plan;
- Responsible person;
- Summary of progress;
- Date of last review;
- Status (whether there has been an increase / decrease in risk rating).

Risk Register Templates are included in this Appendix. The Trust is also increasingly using the electronic Safeguard Risk Management System to provide Risk Registers and to record the management of risks.

**Who oversees the Risk Register?**

Your risk register should be reviewed on a regular basis e.g. by the local ward or department for their risk register or by a risk sub group for Directorate and Group risks. The Trust operates a principle that risks should be managed at the lowest possible level in the organisation but it is also important that there is good knowledge about the main risks so the Trust is also implementing a process whereby the top risks from a particular organisational level in the Trust should be reported for information to the next highest level e.g. the Corporate Decisions Team are informed about Groups top risks and Groups should in turn be informed about the top risks in their Directorate Risk Registers.

**Where can I obtain further information about operating Risk Registers?**

Information can be obtained by contacting the Patient Safety Department.
# Departmental / Local Risk Register

<table>
<thead>
<tr>
<th>No.</th>
<th>Activity</th>
<th>Initial Date</th>
<th>Priority</th>
<th>Review Dates</th>
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</table>
## Risk Register

<table>
<thead>
<tr>
<th>Risk Ref.</th>
<th>Description of Risk</th>
<th>Adequacy of existing controls</th>
<th>Risk Assessment</th>
<th>Risk Rating (S X L)</th>
<th>Risk Priority Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>A</td>
<td>I</td>
<td>U</td>
<td>Consequences (S)</td>
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<td></td>
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<td></td>
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</tbody>
</table>

- **A** = Adequate  
- **I** = Inadequate  
- **U** = Uncertain  
- **Catastrophic** 5  
- **Almost certain** 5  
- **Major** 4  
- **Likely** 4  
- **Moderate** 3  
- **Possible** 3  
- **Minor** 2  
- **Unlikely** 2  
- **Insignificant** 1  
- **Rare** 1
## RISK TREATMENT SCHEDULE

<table>
<thead>
<tr>
<th>Location/Management Unit</th>
<th>Risk Assessor</th>
<th>Date</th>
<th>Date of Review</th>
<th>Risk Ref.</th>
<th>BEFORE RISK RATING</th>
<th>TREATMENT OPTION (Avoid/Reduce/Transfer all or part/Accept)</th>
<th>COSTS</th>
<th>OPTIONS INVOLVING RISK REDUCTION</th>
<th>ACCEPT/REJECT</th>
</tr>
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<tbody>
<tr>
<td></td>
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<td></td>
<td></td>
<td></td>
<td>Non-Recurring (£)</td>
<td>Recurring (£)</td>
<td>‘AFTER’ RISK ASSESSMENT Cons. (C)</td>
<td>Prob. (p)</td>
<td>AFTER RISK RATING (Cxp)</td>
</tr>
</tbody>
</table>

### Risk Rating Scale

- Catastrophic 5
- Major 4
- Moderate 3
- Minor 2
- Insignificant 1
- Almost certain 5
- Likely 4
- Possible 3
- Unlikely 2
- Rare 1