

Appendix 1: Corporate Risk Register Report

Heatmap – November 2025

Consequence Likelihood	1	2	3	4	5
5			394 – Pharmacy Robotics Infrastructure 888 – Equipment Supply	410 – Wycombe Theatres 415 – SMH Theatres	
4				790 – Inadequate Aseptic Unit 851 – Paediatric Audiology Service 875 – Industrial Action 891 – Provision of Psychiatric Care	
3					184 – Ageing Wycombe tower block (interior) 225 – Disruption to Trust technology caused by cyber incidents 935 – Insufficient Technical Staffing Capacity 936 – Critical Infrastructure Risk
2					
1					

Risk ID	Risk Title	Risk Description	Last Update	Inherent Rating	Current Rating
184	Wycombe Hospital Tower, Interior	<p>The ageing WH tower Block is showing signs of interior deterioration which is challenging to maintain in a condition that is suitable for modern healthcare provision.</p> <p>Asbestos is present throughout the construction including the floors, ceilings and service voids. Any remedial or improvement works are impeded by the presence of asbestos as this adds significant costs and risks to repairs and projects.</p> <p>Water pipework is old and has a lot of obsolete components. This is difficult to be removed under asbestos conditions which presents a legionella risk to staff and patients. Water ingress is also common to the lower levels during periods of heavy rainfall.</p> <p>Electrical infrastructure is now obsolete and is difficult to maintain and does not comply with HTM 06. All Patient services could be affected by failures in the electrical infrastructure.</p> <p>Patient environment experience i.e., space, door widths and access are not compliant with modern healthcare standards (HBN's) and Equality Act. This compromises quality patient experience.</p> <p>Ventilation was not a major design requirement when the building was constructed. The current levels of ventilation are not compliant with current standards for healthcare services. As a result, patients and staff may be exposed to airborne infection and be affected by excessively high temperatures during periods of hot weather.</p>	06 Oct 2025 - Risk fully reviewed. Control measures remain in place and tested. Wycombe redevelopment programme underway to allow prioritised decanting of the tower block.	20	15
225	Cyber Attack; Resultant Disruption	<p>There is a risk that the Trust is vulnerable to a cyber attack as we currently have a number of aged applications running on out-of-date Microsoft servers, networks, and telephony systems. As a result, they are no longer receiving vendor security updates. If a cyber attack were to occur, the impact would be the loss of all IT or a significant amount of IT. There could also be the potential loss of part of or all of the phones.</p>	<p>03 Jul 2025 - Since this risk was raised, the below changes have been implemented to ensure the risk scoring can be reduced.</p> <ol style="list-style-type: none"> 1. Majority of the out of support servers (Windows 2008) are either decommissioned or upgraded. The last leg of these servers will also be replaced after LIMs implementation. The Evolve upgrade was also completed in May. 2. The services has been migrated from the old network to the new one. 	20	15

			3. The legacy Telephony has been now replaced by 8x8 and the new BCP telephony has also been implemented. The legacy phones has been already removed from majority areas. The old phones from switchboard, helpdesk will be removed in next one month.		
394	Pharmacy Robotic Infrastructure	<p>The SMH Pharmacy dispensary has a single robot installed around 2008 with an expected life of 10 years, now 6 years past its planned service life.</p> <p>Robotics are essential due to limited space, allowing sufficient storage capacity for medications. Frequent faults cause service disruption, and suppliers only provide reconditioned spare parts.</p> <p>The robot requires replacement with a higher capacity and faster dispensing speed model, especially as it predates the workload shift from WH to SMH.</p> <p>A workflow analysis and ergonomic improvements, along with lifecycle works as part of the PFI structure, are necessary for the refit.</p>	28 Oct 2025 - All on track. Need costings from the PFI team for some of the remedial / extension work that is needed. Meeting arranged for 28.10.25.	15	15
410	Marlow & Main Theatres, Wycombe Hospital	<p>Marlow Theatres: The ventilation and overall infrastructure are outdated, requiring a full refurbishment, including the recovery space, which is inadequate. The site does not meet GPAS/RCoA guidelines or modern HTM 03-01 standards. While Theatres 1 and 3 are maintained to HTM standards, Theatre 2 cannot be brought up to these standards. Breakdowns and downtimes are becoming increasingly frequent.</p> <p>Wycombe Main Theatres: The Anaesthesia Rooms in Theatres 1, 2, and 3 no longer meet minimum or derogation standards, and therefore have been decommissioned presently. Anaesthesia induction is being conducted inside main theatres where HTM standards are being met. The entire suite requires a full refurbishment, including infrastructure, ventilation, and electrical systems, as it is no longer able to meet required standards, with breakdowns occurring regularly.</p> <p>Additionally, the ageing water supply systems across the phase 3 site presents a Legionella risk; therefore, it is being mitigated via point of use filters to maintain safety.</p>	06 Oct 2025 - Multi-disciplined risk assessments completed following DSSR review. Risk assessments shared with Surgical Teams and IPC for their input. £1.6M external capital funding allocated 25/26 to address highest risks.	20	20

415	New Wing Theatres, Stoke Mandeville Hospital	<p>Theatres 1–5 in the New Wing at SMH are operating with infrastructure significantly below HTM compliance, posing risks to patient and staff safety.</p> <p>Key issues include: shared AHUs with no laminar flow or low-level extract, poor scrub room ventilation, lack of ventilation or medical gas alarms, absence of AVSUs and unlabelled isolation valves, and insufficient electrical resilience (e.g. lack of RCDs, IPS/UPS).</p> <p>Plant, ductwork and electrical systems are aged and approaching end-of-life, with limited resilience and difficult access due to asbestos.</p> <p>Without capital investment, there is a risk of sudden failure, unplanned service disruption, and compromised infection prevention or procedural safety.</p>	06 Oct 2025 - Multi-disciplined risk assessments completed following DSSR review. Risk assessments shared with Surgical Teams and IPC for their input. £1.6M external capital funding allocated 25/26 to address highest risks.	20	20
754	Consultant Staffing; Burns ITU Admissions	<p>A critical shortage of burns consultants (reduced to 1.0 WTE from June 2025) prevents the safe admission of adult patients needing ICU care for $\geq 20\%$ TBSA burns. This risks service disruption, reputation and patient safety and increases pressure on the regional Burns Network. Mitigations are underway, including locum recruitment, SAS role expansion, and ICU upgrades.</p>	<p>07 Oct 2025 – Recruitment completed to the Burns Consultant rota with the appointment of SB (in post) and N.AH (joining within weeks). This brings the team to three trained Burns Consultants, enabling the service to meet national staffing standards and restoring full admission capability for major cutaneous burns.</p> <p>The service has therefore returned to business as usual with sustainable consultant cover and improved rota resilience. An updated SOP covering the structure and operation of senior burns cover is being finalised and will be submitted for Care Group review and ratification.</p> <p>Recommendation: Risk to be downgraded and closed, as controls and staffing model are now embedded.</p> <p>(Discussed at RCMG October 2025 – agreed to close)</p>	16	16

790	Aseptic Infrastructure	<p>Aseptic unit(s) footprint is not fit for purpose and has inadequate storage and workflow, with insufficient space to perform tasks in a safe manner, and is sited adjacent to high staff travel and restroom areas within the department.</p> <p>1) Risks that the current unit due to its position within the pharmacy has an increased risk of contamination of the unit due to footfall and location within the pharmacy.</p> <p>2) Staff are working in very close proximity to each other, with medication trays stacked, reducing efficiency and increasing the risks of medication errors. Space constraints also mean that the unit's ability to increase capacity further to meet projected demand (increase in cancer patients 12% per annum) is severely limited in terms of space for the necessary staff to produce the medicines.</p> <p>3) Risk that current aseptic provision within the ICS is also at capacity, with limited and aging in infrastructure with a risk of a failure at multiple Trust sites.</p> <p>Aseptic units location and facilities do not meet the current standards required for a section 10 pharmacy unit operating under Annex 1. Specifically the isolators are beyond normal service life. Annex 1 requirement is for hydrogen peroxide gassing isolators. These isolators will not fit within the current footprint and would not be safe to manage within the current locations.</p> <p>4) Risks to products if isolators fail to perform reducing further the available expiry date of products, increasing the risks of wastage and increased requirements for unit monitoring to ensure QMS compliance.</p> <p>5) Risks from the isolators is that if they fail we would be unable to produce chemotherapy and treat patients in an emergency situation. Some products would be difficult to source due to very short expiry dates and stability particularly affecting bone marrow transplantation patients. Some products have a very short shelf life once made of around an hour and cannot be sourced from other units.</p> <p>6) Risk of increased costs associated with outsourcing 100% of products and a delay in products arriving once orders placed.</p> <p>7) External provider capacity outside of our control and risk that they would be unable to fulfill urgent or emergency increased demand without sufficient notice of planned increased requirements.</p> <p>8) Risks of being unable to continue clinical trials.</p>	28 Oct 2025 – Meetings ongoing to discuss plans including related to outstanding action (Frimley)	16	16
851	Paediatric Audiology	<p>The Paediatric Audiology Service at Buckinghamshire Healthcare NHS Trust (BHT) has been assessed as having serious clinical risks and governance failures. The service was rated as follows during an external review under the National Paediatric Hearing Services Improvement Programme.</p>	07 Oct 2025 - Current position: Progress continues across the paediatric audiology recovery programme, with key workstreams in recruitment, training/competency,	16	16

			<p>estates, SOP development, and patient recalls. The service remains under enhanced monitoring.</p> <p>Key risks:</p> <p>Workforce: Ongoing vacancy for Paediatric Lead; limited national recruitment pool. Recruitment remains a critical dependency for sustainable service recovery.</p> <p>Training and Competency: Staff release and funding constraints are delaying the completion of training, necessitating a service pause to create capacity.</p> <p>Service Pause & Triage: A planned three-month pause in hearing aid work poses a risk to access and communication, requiring robust triage and family engagement processes.</p> <p>Recalls: Approximately 250 recall cases are anticipated; logistics, mutual aid coordination, and timely family communication present operational risk.</p> <p>Governance & Timelines: Multiple interdependent workstreams risk slippage without defined Gantt/timeline tracking and accountability.</p> <p>Mitigations:</p> <p>Active recruitment with potential banding review if the post remains vacant.</p> <p>The training needs analysis is complete; one staff member has been enrolled; and further funding is being progressed.</p> <p>Recall workstream established with</p>		
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			<p>named leads and external SME oversight for harm review.</p> <p>Regular estate meetings are in place; asbestos work has been agreed upon.</p> <p>SOP review and adaptation are underway during the service pause, with both internal and external scrutiny.</p> <p>EQIA and business case under development for formal sign-off.</p> <p>Overall risk rating: High (workforce dependency and recall complexity) Following review: October 2025 Paediatric Audiology Working Group.</p>		
875	Industrial Action	<p>The risk of industrial action in respect of a lack of an acceptable and timely pay offer.</p> <p>On 2 May 2025, the BMA announced their intention to ballot resident doctors for renewed industrial action over pay. The ballot will open on 27 May 2025 and will close on 7 July 2025. If the ballot returns a "yes" vote, the BMA state that there mandate for industrial action will run from July 2025 until January 2026.</p> <p>There will be an impact on patient care and service delivery as a result of industrial action.</p> <p>The longer-term impact on the physical and psychological health of colleagues may be affected by strike action, and some staff groups may be unwilling to support work cover.</p> <p>Non medical unions and the BMA are also in the process of carrying out consultative ballots with their members (nursing, consultants and SAS doctors) to determine whether they will ballot their members for industrial action.</p>	07 Oct 2025 – Actions reviewed and updated.	16	16
888	Supply of Equipment; Adults & Children	<p>There is a significant risk that adults and children with equipment needs may not receive the prescribed equipment essential for managing their neurological, muscular, and physical conditions. This situation could result in serious complications, including airway compromise, development of</p>	15 Oct 2025 - Millbrooks aiming to be up and running with a full service by the end of October. Catalogue being agreed 15th Oct.	15	15

		pressure ulcers, and limited mobility. Consequently, these patients may experience difficulty socialising, attending school, or performing daily activities. Given their vulnerability, ensuring they have access to the appropriate equipment is crucial			
891	Provision of Psychiatric Care	The current provision for emergency psychiatric advice on inpatient wards does not include responsive provision from the Psychiatric Liaison Service which provides services at Stoke Mandeville site. This means that if a patient requires emergency psychiatric care at : Wycombe; Amersham or Buckingham hospitals the community crisis team have to be called. There have been incidents where due to crisis team criteria and pressures this cannot be delivered in a timely way. This has led to unsafe situations in the wards on these sites.	20 Oct 2025 - Discussed at the RCMG meeting in October - for further information to be added re: Eating Disorder Pathway. Action for Deputy Chief Nurse and Director of Nursing for Integrated Medicine.	20	16
903	Continence Provision	There is a significant risk that adults with continence needs may not receive the prescribed continence products essential for managing their ongoing acute and chronic conditions. This situation could result in serious complications, including development of pressure ulcers, and limited mobility. Consequently, these patients could have an extended length of hospital stay as equipment cannot be delivered for a safe discharge or failure in providing equipment could lead to a hospital admission and could lead to difficulties in performing daily activities. Given their frailty and vulnerability, ensuring they have access to the appropriate equipment is crucial.	20 Oct 2025—Continuing to monitor however acceptable process in place—reduce score and remove from corporate RR	15	12
935	Insufficient Technical Staffing Capacity	There is a risk that the Estates team may be unable to deliver planned preventative maintenance (PPM) to the required frequencies, as a result of persistent vacancies in key technical roles such as Technicians and Estates Officers, which may lead to non-compliance with statutory and HTM requirements, increased asset failure rates, and reduced assurance to the Trust.	Risk reviewed at the Property Services Directors Assurance Meeting and accepted onto the Property Services Risk Register. Discussed at RCMG 20 October – to be escalated to CRR	15	15
936	Critical Infrastructure Risk	There is a risk that critical infrastructure systems across Trust premises may fail or become unsafe, as a result of a £200 million total backlog maintenance and Critical Infrastructure Risk (CIR) liability. CIR refers to infrastructure whose failure would directly impact patient safety, service delivery, or statutory compliance. Consequences may include service interruption, harm, or regulatory enforcement under HTMs, Building Regulations, or health and safety law.	Risk reviewed at the Property Services Directors Assurance Meeting and accepted onto the Property Services Risk Register. Discussed at RCMG 20 October – to be escalated to CRR	15	15