



MEETING TITLE Public Trust Board		MEETING DATE 26 November 2013	
TITLE of PAPER		Risk & Assurance Strategy	PAPER REF 6.1
STRATEGIC OBJECTIVE		To develop culture, systems and processes to support continuous improvement and innovation	
PURPOSE OF THE PAPER		To approve the attached Strategy document following its previous review in Audit Committee and SMG.	
For Approval		<input checked="" type="checkbox"/>	For Assurance
For Decision		<input type="checkbox"/>	Discussion/Information
AUTHOR / LEAD	Mark Hall Associate Director for Risk & Safety	ACCOUNTABLE DIRECTOR	Steve Page Executive Director of Standards & Compliance
PREVIOUSLY CONSIDERED BY	Committee/Group: Trust Board Audit Committee SMG	Date: 24 Sept 2013 17 Oct 2013 6 Nov 2013	
RECOMMENDATION	That the Trust Board agrees the content and approves the attached Strategy document as reflective of current Risk Management systems.		
RISK ASSESSMENT			Yes No
Corporate Risk Register and/or Board Assurance Framework amended			<input checked="" type="checkbox"/> <input type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify)			<input type="checkbox"/> <input checked="" type="checkbox"/>
Legal implications/Regulatory requirements			<input checked="" type="checkbox"/> <input type="checkbox"/>
Quality and Diversity Implications			<input type="checkbox"/> <input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Registration Outcome(s)		4, 7, 8, 9, 10, 11, 12	
NHSLA Risk Management Standards for Ambulance Trusts		1.4 1.5 2.2 2.5	

1. PURPOSE

- 1.1 To approve the attached Strategy document following its previous review in Audit Committee and Senior Management Group (SMG).

2. BACKGROUND

- 2.1 The Risk Management Strategy requires annual review by the Trust Board.
- 2.2 Prior to this meeting the document has been subject to detailed review and amendment via the Senior Management Group and Audit Committee.
- 2.3 The updated document is compliant with NHSLA standards and other best practice guidance.

3. KEY CHANGES

- 3.1 The majority of content in the document is unchanged from the previous version, although significant changes have been made to formatting to shorten and streamline the core document.
- 3.2 Key changes following the SMG and Audit Committee reviews:
- Clarify the role of the Board in relation to defining risk appetite.
 - Align the Quality Impact Assessment process with wider risk management.
 - Expand on the role of internal audit.
- 3.3 The risk and assurance information flows diagram in Appendix 5 is a new addition and has been developed through extensive Executive and Non-Executive Director discussion focussed on strengthening the flow of risk information through the organisation.

4. RECOMMENDATION

- 4.1 It is recommended that the Trust Board agrees the content and approves the attached Strategy document as reflective of current Risk Management Systems.