

Yorkshire Ambulance Service MHS

NHS Trust

An Aspirant Foundation Trust

MEETING TITLE :MEETING IPublic Trust Board29/03/2016							DATE		
TITLE of PAPER		Board Assurance Framework (BAF) including Risk Register					REF	5.3	
STRATEGIC OBJECTIVE		All							1
PURPOSE OF THE PAPER		To inform the Board on the risks recorded within the BAF and Corporate Risk Register and to provide assurance on the effective management of corporate risks							
For Approval				For Assurance					
For Decision				Discussion/Information					
AUTHOR / LEAD	Maxine M T Risk Manag		'	ACCOUNTAG DIRECTOR	RECTOR Director Govern			Page, Executive for of Quality, rnance and rmance Assurance	
DISCUSSED AT / INFORMED BY The BAF and CRR are subject to the quarterly cycle of peer review through Risk and Assurance Group, Trust Executive Group and Board Committees. Key risks and mitigations on the BAF were discussed at the Board Development Meeting in February 2016. This paper presents the final BAF 15/16 with proposals for 16/17 and the Corporate Risk Register									
PREVIOUSLY AGREED AT:			Committee/Group:INot ApplicableI					Date:	
RECOMMENDATION It is recommended that Trust Board no developments outlined in the report an regard to the effective management of						nd is assu	ured with		
RISK ASSESSMENT						Yes	No		
Corporate Risk Register and/or Board Assurance Framework amended If 'Yes' – expand in Section 4. / attached paper									
Resource Implications (Financial, Workforce, other - specify) If 'Yes' – expand in Section 2. / attached paper									
Legal implications/Regulatory requirements If 'Yes' – expand in Section 2. / attached paper									
Equality and Diversity Implications If 'Yes' – please attach to the back of this paper									
ASSURANCE/COMPLIANCE									
Care Quality Commission				All					
Monitor Quality	All								

1. PURPOSE/AIM

- 1.1 To inform the Trust Board on the risks recorded within the BAF and Corporate Risk Register and to provide assurance on the effective management of corporate risks.
- 1.2 The BAF was discussed and reviewed at the Board Development Meeting in February 2016. This is the final BAF of 15/16 with new areas of risk for consideration for the BAF 2016/17 which will be presented to Board in May 2016.

2. BACKGROUND/CONTEXT

- 2.1 The 2015/16 cycle of the BAF is due to be closed following the above review at the BDM in February 2016, which agreed risks to carry forward and residual risks to be managed at local level.
- 2.2 The strategic objectives on the BAF are underpinned by management of corporate, specialist and local risk registers, covering the full range of Trust business.
- 2.3 The updated BAF and risk register have been reviewed by the Trust Executive, senior management, in the Risk and Assurance Group and through December 2015 to February 2016 round of Board Committees.

3. REVIEW OF KEY RISKS ON BAF 15/16

3.1 The Board Assurance Framework was reviewed in the Board Development Meeting in February 2016 and the status of current BAF risks agreed, with a proposal to carry forward high risks and manage residual risk at local level for a number of existing moderate risks. Proposals for finalising the 15/16 BAF are given below:

Risk 1a:Adverse clinical outcomes due to failure of reusable medical devices and equipment

Policy and SOPs in place, Manager in post. Residual risk to be managed at local level. Close on BAF 15/16

Risk 3a: Inability to deliver performance targets and clinical quality standards

Risk to remain on the BAF 16/17 recognising the ongoing challenge relating to A&E performance and the associated transformation plan continuing through 2016/17. There are also factors in other parts of the healthcare system, eg turnaround, that impact on mitigation of this risk.

Risk 3b. Lack of compliance with key regulatory requirements (CQC, HSE, IGT) due to inconsistent application across the Trust

Risk updated to include key CQC findings with delivery of CQC action plan being monitored by TEG. To review risk after follow-up CQC inspection

Risk 4a: Loss of income due to inability to secure/retain service contracts, and challenge to the delivery of Trust strategy within the constraints of the wider commissioning system

Risk is inherent in other risks on BAF in relation to delivery of transformation programme, performance targets and impact of factors in other parts of healthcare system, eg. turnaround, that challenges delivery of Trust objectives. To close as separate risk.

Risk 4b: Inability to implement PTS transformation programme resulting in loss of income due to failure to secure/retain service contracts Risk will remain on the BAF 16/17 reframed to capture impact of current contract negotiations and urgent tier review. Potential for risk to increase.

Risk 5a: Inability to deliver service transformation and organisational change, including non-delivery of cost improvement programmes Remains a significant risk to carry forward to BAF 16/17. Project Management Office is established, identified management and leadership development required alongside further work on staff engagement with transformation and CIP and roll out of Service Line Management.

Risk 5b: Failure to learn from patient and staff experience and adverse events within the Trust or externally

Strengthened capacity and capability in Clinical Directorate function to undertake robust investigations, work on safety culture survey, and embed the Clinical Leadership Framework. Freedom to Speak Up working group with staff Forum and union representation to enhance staff engagement. CQC follow up inspection will measure progress. To link risk with 6a

Risk 5c: Insufficient alignment and responsiveness of corporate services to operational service requirements

Systematic engagement process between support services and operational service lines needs further development. Work required to implement Service Line Management and develop SLAs. To carry forward to BAF 16/17

Risk 6a: Adverse impact on clinical outcomes due to failure to embed the clinical leadership framework.

Implementation of the clinical career framework and associated supervision as part of A&E transformation plan to continue into 2016//17. To remain open on the BAF 16/17 and link with 5b

Risk 6b: Adverse impact on clinical outcomes and operational performance due to inability to deliver the A&E workforce plan and associated recruitment and training requirements.

Risk To remain on BAF 16/17 with focus of mitigation on planned implementation of new clinical career framework and supervision model as part of A&E Transformation Plan to support recruitment and retention, and delivery of A&E workforce plan

Risk 6c: Challenge to the delivery of key objectives due to ineffective staff engagement

Development of Communications and Engagement Strategy ongoing along with work to strengthen relationship with staff forum and union reps.

Staff engagement remains a risk to delivery of objectives. To remain on 16/17 BAF

Risk 7a: Adverse impact on organisational performance and clinical outcomes due to significant events impacting on business continuity. Significant live testing of BC plans in A&E, NHS 111 and ICT services over Christmas period as a result of flood event. To remain on BAF for 16/17 in recognition of the changing nature of risks to business continuity.

Risk 8a: Deficit against planned financial outturn e.g. due to contract target penalties and non-delivery of CQUIN scheme.

Current contract negotiations for 16/17 are ongoing and there are a range of internal, local and national factors impacting on this risk for 16/17. Risk to remain open for BAF 16/17 and reframed in light of the changing context

4. NEW AREAS OF RISK FOR CONSIDERATION FOR BAF 16/17

- 4.1 Additional areas of risk were considered relating to the wider Urgent and Emergency Care Strategy, Vanguard and other health economy system changes and the new 7 day system demands, Ambulance Response Programme, external factors impacting on performance including turnaround and reconfigurations, national band 6 paramedic discussions and the impact of national policy and funding changes.
- 4.2 These are being reviewed further by TEG and will be addressed in the 2016/17 BAF

5. CORPORATE RISK REPORT

5.1 The following risks were identified by the Risk & Assurance Group and recommended to the Trust Management Group from December 2015 to February 2016 for inclusion on the Corporate Risk Register:

Medical Device Age Profile

Risk 741: Age profiling has identified that the Trust has a quantity of medical devices that are reaching, or have reached their 10 year lifespan and should be replaced as per policy. This is being addressed through the capital programme. Risk rating Moderate (12)

Calderdale and Huddersfield Trust proposed reconfiguration of services

Risk 745: CHFT reconfiguration could result in up to an additional 9600 driving hours per year impacting on performance and patient safety. The Trust is working with local commissioners to identify the impact and mitigation required. Risk rating Moderate (12)

Vanguard Programme communication plan

Risk 754: No communications plan or capacity to develop one within current project team which may result in a lack of understanding and possible resistance to transformational changes by YAS colleagues. The Trust is working closely with the WY Vanguard leads to mitigate this risk. Risk rating Moderate (12)

Lack of PTS Bid Resource

Risk 765: PTS under-resourced and lacking procurement and tendering expertise to effectively bid for contracts resulting in loss of contracts or retaining at a loss. A business case for a substantive Bid Resource has been submitted and is being considered as part of wider portfolio review changes. Risk Rating High (15)

Commissioner and YAS management of hospital turnaround

Risk 766: hospital-specific risks regarding turnaround are registered separately. This risk has been opened to raise turnaround profile with commissioners and discuss organisational impact at CMB Risk Rating High (16)

Movement of defibrillators between vehicles

Risk 767: Defibrillators are being transferred between vehicles meaning that the Medical Devices Team cannot track them for scheduled maintenance. Immediate action has been taken to highlight this risk to staff and managers.. Initial risk Rating Moderate (9) increased to Moderate 12

6. PROPOSALS/ NEXT STEPS

- 6.1 The final 2015/16 BAF and February Board review will be used to inform the 2015/16 Annual Governance Statement.
- 6.2 Further work will be undertaken by the Executive team to develop the 2016/17 BAF based on February Board discussion. The updated BAF will be presented to the Board in May for approval.
- 6.3 The quarterly cycle of the BAF review will continue through management groups and committees.
- 6.4 The Risk Register will continue to be reviewed at each meeting of the Risk and Assurance Group.

7. RECOMMENDATIONS

7.1 It is recommended that Trust Board notes the developments outlined in the report and is assured with regard to the effective management of risks.

8. APPENDICES/BACKGROUND INFORMATION

- 8.1 Appendix 1 BAF 2015/16
- 8.2 Appendix 2 Corporate Risk Register (February 2016)