



MEETING TITLE Trust Board		MEETING DATE 29/11/2018	
TITLE of PAPER	Risk Management Report with Board Assurance Framework 2018/19 and Corporate Risk Register	PAPER REF	6.1
STRATEGIC OBJECTIVE(S)	All		
PURPOSE OF THE PAPER	The purpose of this paper is to <ul style="list-style-type: none"> ▪ Present the BAF for 2018/19 ▪ provide detail of changes to the Corporate Risk Register ▪ highlight specific risks and provide an update on actions to mitigate 		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input checked="" type="checkbox"/>
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DISCUSSED AT / INFORMED BY : Risk & Assurance Group, Monthly Directorate and Risk leads meetings, Trust Management Group, Health and Safety Committee, Information Governance Working Group, Quality Committee, F&I Committee.			
PREVIOUSLY AGREED AT:	Committee/Group: Not Applicable	Date:	
RECOMMENDATION(S)	It is recommended that the Trust Board: <ul style="list-style-type: none"> ▪ Notes updates to the Board Assurance Framework for 2018/19 ▪ notes amendments to the Corporate Risk Register ▪ gains assurance from the robust processes in place to manage risk 		
RISK ASSESSMENT		Yes	No
Corporate Risk Register and/or Board Assurance Framework amended		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Diversity and Inclusion Implications		<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission		All	
NHSI Single Oversight Framework		1. All	

1. PURPOSE/AIM

1.1 The purpose of this paper is to:

- Present the BAF for 2018/19
- provide detail of changes to the Corporate Risk Register
- highlight specific risks and provide an update on actions to mitigate

2. BACKGROUND/CONTEXT

2.1 Effective risk management across all levels of the Trust is essential for safe and effective service delivery as well as pro-active planning for Trust development. This paper details the processes in place to effectively manage risk.

3. BOARD ASSURANCE FRAMEWORK

3.1 The BAF for 2018/19 is presented at Appendix 1. Quarterly risk level projections set out in the BAF reflect actions and milestones set out in Trust level and Directorate level business plans which are aligned to the strategic objectives and tracked on a quarterly basis.

3.2 For Q2, risk ratings are in line with projections made at the start of the year with no deviation reported. A summary of key actions to mitigate risk are presented on pages 4-5.

4. CORPORATE RISK REGISTER

4.1 The CRR is reviewed by the Risk Assurance Group (RAG) and TMG on a monthly basis. It comprises strategic and operational risks across the Trust that have a current risk rating of 12 or above. The Corporate Risk Register is attached at Appendix 2.

4.2 CHANGES TO CRR SINCE PREVIOUS AUDIT COMMITTEE

4.2.1 The risks below have been added to the Corporate Risk Register since last Trust Board and have been through the review cycle to RAG and TMG:

Risk 1084: National ESMCP delays

IF there are significant delays to the Emergency Services Mobile Communications Programme (ESMCP) national project as advised by the national team, THEN 240 YAS A&E vehicle MDTs will be in excess of 10 years old, meaning a potential for failure of the MDT's with no available replacement alternative RESULTING IN an impact for frontline operational staff who may not have access to a vehicle with a working MDT.

Risk rating Amber (12)

We are monitoring national airwave implementation timescales and procurement. To ensure sufficient current spare MDTs are held a capital bid has been approved to purchase further MDT devices.

Risk 1119: Financial viability of IUC bid submission

IF negotiations regarding the specification do not allow the removal of cost to achieve the challenging financial envelope set by commissioners THEN YAS may find itself in a position where it wishes to withdraw from the process RESULTING IN significant stranded costs within the organisation.

Risk Rating Red (16) *A range of costed model options have been produced and considered by Trust Board.*

Risk 1121: Purchase of ADASTRA licence for IUC/NHS111

If the tender timescale slips further then there is a risk the extension to the current Adastra license contract will run out resulting in no Adastra licenses to operate beyond end of March 2019 Risk Rating Red (15)

Licence in place to cover 2018/19. Action for Procurement and ICT to negotiate potential licence requirement post March 2019. Originally graded 20, this risk rating (likelihood) has been reduced.

Risk 1128: Avaya Telephony Platform

IF the current Avaya telephony platform is not replaced THEN there is an increasing risk that we will not be able to upgrade/expand the system AND the manufacturer/suppliers will be unable to provide support AND there is increased likelihood of system failure due to the age of the hardware RESULTING IN complete failure of telephony services, significant delays/impact on patient care and trust reputation. Risk Rating Red (16)

A tender is in progress to determine the future telephony solution. ICT are actively in discussion with BT to mitigate the short term risk during transition as far as possible. There will be ongoing management and support of the system by BT and regular meetings between YAS and BT to manage the risk.

Risk 1129: Shared mailboxes

IF user access is not monitored for shared mailboxes THEN users who move departments or leave the trust will still have access to mailboxes they no longer require RESULTING IN potential for breaches of information or opportunity for wilful access to information that the individual should no longer have access to. Risk Rating Amber (12)

Leavers will take their nhs.net to another NHS organisation and the shared mailbox will remain accessible on their profile unless removed by the mailbox owner. Not all mailboxes have an identified owner. ICT are obtaining a list of all shared mailboxes, establishing those which appear active and dormant, and identifying potential owners. Information Asset Owners at IG Working Group are aware of the risk and will support with the review and developing a monitoring process going forward.

Risk 1132: Email distribution lists

IF email Distribution Lists are not effectively managed THEN email communications could be sent to leavers who take their nhs.net email address RESULTING IN a breach of personal information Risk Rating Red (15)

Guidance and communications are being developed for staff with awareness targeted at key staff groups such as administrators and PA's. ICT can set up 'dynamic' administering of Distribution Lists showing on Outlook to remove leavers as their address changes from being YAS-registered. Distribution Lists created by individuals will have to be regularly checked by the owner and cannot be managed by ICT.

Risk 1133: Fleet Lone Working

IF provisions are not in place to maintain the safety of lone workers in the Fleet Team THEN staff will be unable to raise the alarm in the event of accident, injury or incident RESULTING IN failure to comply with Health and Safety Legislation Risk Rating Amber (12)

Role based risk assessments are being completed, a Fleet lone working procedure is in development and technological solutions being explored. Wider scoping of this risk is ongoing to capture lone workers in other roles in the organisation.

Risk 1163: EOC Festive Rota cover

IF EOC is unable to address the predicted staffing issues for the festive period THEN there will be insufficient EMD and Dispatch cover RESULTING IN impact on service delivery, failure to achieve SLA, potential inability to safely run all dispatch bays, delays in allocating resources and resultant delay in reaching the patient Risk Rating Red (20)

The targeted action plan has been successful in reducing the deficit hours to a manageable level. The EOC Team are continuing to address further actions to optimise staffing provision.

- 4.2.2 The following risk ratings have been reduced since last Trust Board and have therefore been removed from the Corporate Risk Register:

Risk 150: Insecure storage of paper-based records on YAS sites

IF information is not stored securely on YAS premises THEN there is potential for inappropriate access RESULTING IN a breach of the Data Protection Act *Whilst we continue to evaluate information stored on YAS premises in terms of retention and disposal, it is not being found to be stored insecurely. IG Working Group requested to reduce the risk from the CRR to be managed locally with oversight of IG function and collectively by IAOs through IGWG; RAG and TMG were supportive of this proposal.*

Risk 680: Air conditioning and fire suppression in server rooms

IF the Air Conditioning Unit breaches the tolerance range required for the ICT Server Rooms THEN the temperature will increase RESULTING IN servers overheating and failing and potential fire risk, thus losing ICT systems and services to YAS and its Patients and risk to staff.

Works to Springhill site are completed and commissioned. Risk closed.

Risk 860: Align Ancillary Cleaning Services with operational change

IF recommendations from the review of Ancillary Cleaning Services are not delivered THEN the Ancillary Service will not be positioned to respond effectively to organisational change (ie. Hub & Spoke) RESULTING IN potential for failure to meet service levels

Decision taken at Programme Board that the AVP will be delivered in-house. Work is ongoing in respect of the management structure and plans to position the service to effectively respond can now be put in place.

Risk likelihood reduced and process to be managed locally.

Risk 941: Nursing Roles and Special Pensions Status

IF YAS does not make clear on recruitment that a role does not require nursing registration THEN the Trust will have recruited nurses into non-nursing roles who believe they qualify for pensions special status but do not RESULTING IN legal challenge and potential financial impact

This risk was entered onto the corporate risk register following an internal audit which gave limited assurance of controls in place to ensure there is clarity of whether there is a requirement for nursing status in a non-nursing role where a registered professional applies for the role. The requirement for professional registration is included in the Job Description and it is clearly highlighted on NHS jobs whether the role is NMC or Admin and Clerical and does not require professional registration. This is recorded in ESR and will be made clear to the applicant.

The audit identified a lack of process for ensuring robust checks of proof of registration where this was required. Proof of professional registration forms part of the pre-employment checks process which is robustly applied and monitoring of registration and revalidation is now in place.

Risk closed and Internal Audit actions completed

Risk 1035: Allocation of CPAD from CAD

IF a previously allocated CPAD device is not reactivated following use THEN it will no longer show in CAD RESULTING IN failure to allocate to an incident and delay to patient intervention

Internal audit of the process for reallocation of CPADs on CAD has provided 'Good' governance assurance. Risk reduced and remaining actions to be delivered at local level.

Risk 1060: PTS Weekend Rotas

IF the weekend rotas in the PTS Communications Centre are not staffed sufficiently THEN performance maybe effected RESULTING IN missing of KPI targets and reduced patient experience

Dedicated weekend staff now in place to cover the rota. Risk Closed

Risk 1088: Leeds AVP Faulty ventilation system

If the installed ventilation system at Leeds (Central) AS is not working correctly then employees will be exposed to unhealthy working conditions resulting in possible future cases of industrial asthma and lung diseases.

The risk was originally graded as Red (16) with an action to commission LEV testing to ascertain extent of ventilation problems and the required remedial works. Testing established that levels were within acceptable range with some remedial works completed. Further work is planned to continue to reduce exposure to the minimum possible, this will be managed at local level.

Risk 1089: Huddersfield AVP garage area ventilation system

If the installed ventilation system for vehicle exhaust fumes at Huddersfield AS is not working correctly then employees will be exposed to unhealthy working conditions resulting in possible future cases of industrial asthma and lung diseases.

Testing has been conducted and ventilation established as acceptable in accordance with HSG258 and COSHH regulation 9 (2). Risk closed

Risk 1090: P88 - Updating @yas.nhs.uk accounts emails with @nhs.net on internal systems

IF known internal systems electronic or paper-based are not updated with NHS.net emails addressees THEN Internal/External communications will fail once MS exchange is withdrawn 6 month post migration RESULTING IN lack of communications/updates from internal systems external stakeholders emailing old email addresses stored on hardcopy media Trust reputation. *System Administrators are engaged with suppliers of key systems to arrange for bulk upload of nhs.net email addresses and this has happened successfully in some systems. A datafile containing users with @yas.nhs.uk and @nhs.net accounts to support the upload or manual change. Risk reduced to be managed at local level.*

Risk 1094: P88 User acceptance for nhs.net

IF email users do not complete NHS Mail User Acceptance and security questions before 17th April THEN email users will not be able to send out emails from the 17th April RESULTING IN Increased service desk calls and key stakeholders not receiving key pieces of information to make business decisions. *95% staff are now signed up to the Acceptable Use Policy (AUP), risk reduced and to be managed locally.*

Risk 1127: P90 - Authentication Service Desk software

IF ICT cannot solve accessing the new service desk software in the cloud using NHSmail instead of the old email address THEN Users would need to log in with their old email addresses RESULTING IN Confusion to staff, no confidence in IT, reluctance to use system *We will utilise the existing tool until solution is fully in place, the Head of ICT and Infrastructure are aware of the issue, the Infrastructure team have determined the preferred single sign on option. A number of tests have been successful, full implementation can be managed at local level.*

Risk 1131: National Furosemide shortage

IF the national shortage of Furosemide continues indefinitely THEN YAS will exhaust our stock RESULTING IN potential for increased patient deterioration and adverse outcome in Acute Heart Failure *This risk was added during July, however a supply of sufficient ampoules for 10 months was obtained meaning the risk has been mitigated and closed within the quarter.*

- 4.3 Risks with significant amendments to description or risk rating that remain on the CRR

Risk 945: Implement Commander Framework




The risk 'Commander Competency' has been re-articulated to reflect the requirement to implement the Commander Framework as follows:
IF the Commander Framework is not effectively implemented THEN the Trust would not be compliant with the EPRR core standards RESULTING IN having commanders not trained and not competent to manage an incident
Risk rating is currently Amber 12 *however a proposal is to be made to next TMG to increase the risk rating to reflect the requirements of staff volume and training capacity to deliver the implementation plan.*

Actions have been documented include a refresh of in-house training materials for Bronze and operational commanders, and proposal to take forward a business case for training capacity.

4.4 Winter risks report

The Risk Team are working closely with the Resilience Team to develop a risk register that reflects risks that are pertinent to the winter period. This will include winter-specific risks such as the impact of 'flu on staff absence, but will also capture those risks that exist all year, for example hospital handover and performance, which are impacted by increased demand over the winter period. There will inevitably be overlap in the winter risk report with the corporate risk register particularly in terms of impact of increased demand on the whole healthcare system.

4.5 The CRR is colour coded to indicate the risk is within the remit of the Quality Committee, Finance and Investment Committee or the remit of both committees.

Quality Committee	
Finance & Investment Committee	
Both	

5. PROPOSALS/NEXT STEPS

- 5.1 The Board Assurance Framework 2018/19 will reviewed through the quarterly governance cycle to assess projections for Q3.
- 5.2 The Corporate Risk Register will continue to be reviewed at each meeting of the Risk and Assurance Group, with moderation through TMG
- 5.3 Work will continue to develop the Trusts Risk Management programme to ensure risk management is embedded at all levels in day to day practice and the Trusts risk maturity is developed.

6. RECOMMENDATIONS

- 6.1 It is recommended that the Trust Board:
 - Notes updates to the Board Assurance Framework
 - notes amendments to the Corporate Risk Register
 - gains assurance from the robust processes in place to manage risk and develop the risk maturity of the Trust

7. APPENDICES/BACKGROUND INFORMATION

- 7.1 Appendix 1: Board Assurance Framework 2018/19
- 7.2 Appendix 2: Corporate Risk Register