



MEETING TITLE Trust Board Meeting in Public		MEETING DATE 28/11/2019	
TITLE of PAPER	Risk Management Report with Board Assurance Framework (BAF) 2019/20 and Corporate Risk Register (CRR) and Risk function updates	PAPER REF	5.3
KEY PRIORITIES	Create a safe and high performing organisation based on openness, ownership and accountability		
PURPOSE OF THE PAPER	The purpose of this paper is to provide an update on: <ul style="list-style-type: none"> ▪ The strategic risks captured in the Board Assurance Framework 2019/20 ▪ Changes to the Corporate Risk Register, including new and emergent areas of risk 		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input checked="" type="checkbox"/>
AUTHOR / LEAD	Kate Taylor, Head of Risk David O'Brien, Associate Director of Performance, Assurance and Risk	ACCOUNTABLE DIRECTOR	Steve Page – Executive Director of Quality, Governance & Performance Assurance, Deputy Chief Executive
DISCUSSED AT / INFORMED BY – Risk Assurance Group, Operational Senior Management Team meetings, IG Working Group, Trust Management Group.			
RECOMMENDATION(S)	It is recommended that the Board: <ul style="list-style-type: none"> • Notes the latest position regarding the Board Assurance Framework for 2019/20 • Notes that during December and January the BAF will be updated with Q3 progress reports • Notes changes to the Corporate Risk Register and 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 checked="" type="checkbox"/>	<input type="checkbox"/>
Equality Impact Assessment		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Choose a DOMAIN(s)		All	

1. PURPOSE/AIM

1.1 The purpose of this paper is to provide an update on:

- The strategic risks captured in the Board Assurance Framework 2019/20
- Changes to the Corporate Risk Register, including new and emergent areas of risk.

2. BACKGROUND/CONTEXT

2.1 Effective risk management is a cornerstone of the Trust's *One Team, Best Care* strategic priority to *create a safe and high performing organisation based on openness, ownership and accountability*.

2.2 Risk is inherent in all Trust activities and risk management is everybody's business. Failure to manage risk well could lead to harm to patients staff or others, loss or damage to the Trust's reputation and assets, financial loss, and potential for complaints, litigation and adverse publicity.

2.3 Effective risk management is essential at all levels and across all activities of the organisation in order to support safe and high quality service delivery as well as pro-active planning for Trust development.

3. BOARD ASSURANCE FRAMEWORK

3.1 Appendix 1 presents the Board Assurance Framework (BAF) for 2019/20. Quarterly risk level projections shown in the BAF reflect actions and milestones set out in Trust-level and directorate-level operational plans. These are aligned to the Trust's strategic objectives and implementation is tracked on a quarterly basis.

3.2 The BAF was most recently reviewed and updated to capture the position at the end of Q2, including summaries of progress to date in implementing mitigation actions relating to the strategic risks in the BAF and the controls associated with these.


3.3 At Q2 the year the risk ratings and mitigation plans were broadly in line with projections. Significant Trust-wide work to implement mitigation actions is evident across all areas of risk. However, overall risk exposures will not materially reduce until many of these actions progress to a more advanced stage of implementation such that they are closer to completion and subsequent embedding.

3.4 During December and January the BAF will be updated with Q3 progress reports and the risk exposure trajectories reviewed on the basis of this information.

4. CORPORATE RISK REGISTER

4.1 Appendix 2 presents the Corporate Risk Register (CRR).

The CRR is reviewed by the Risk Assurance Group (RAG) and the Trust Management Group monthly. It comprises those strategic and operational risks being managed across the Trust that have a current risk score of 12 or above (based on the likelihood and consequence criteria found in the Trust's risk evaluation matrix). The CRR is colour coded as shown below to indicate whether each risk falls within the remit of the Quality Committee, or the Finance and Investment Committee, or the remit of both committees.

Quality Committee	
Finance Investment Committee	
Both Committees	

4.2 CHANGES TO CORPORATE RISK REGISTER SINCE PREVIOUS TRUST BOARD MEETING (SEPTEMBER 2019)

4.2.1 Risks added to the CRR since previous Trust Board meeting:

1243 - Vehicle Familiarisation

IF YAS does not provide documentary evidence of all aspects of vehicle familiarisation training including staff members present, learning objectives and dates/times/vehicles THEN the Trust may not have a safe system of work as outlined in Health and Safety at Work legislation RESULTING IN potential regulatory action and increased litigation against the Trust.

1241 Management of Paper Records within YAS

IF HR/Departmental paper files being held on YAS premises continue to be held in unsecure cabinets and locations THEN the Trust will not be compliant with Data Protection regulations RESULTING IN the potential for unauthorised access, inability to locate files to comply with SARs or investigations and potential for the Trust to be fined by the Office of the Information Commissioner.

1205 - Dental Pathway Additional Demand

IF the Dental CABS cant cope with their demand as patients dial 111 THEN the reputation of the overall service including IUC will be compromised and potentially impact in patient confidence of the NHS 111 service as a whole as patients are accessing IUC telephone service the excess demand can not be managed within IUC staffing levels which is affecting contractual performance. RESULTING in patients accessing NHS Online and additional cases going on the IUC Core clinical queue for low toxicity calls within its queue. Some patients redial and choosing an alternative options than selecting the dental option on the IVR. This additional demand could affect call back response to patients and contractual performance.

1233 - Trust Board representation

IF the Trust does not ensure diversity of board representation THEN the Trust will be unable to demonstrate compliance with the WRES standards RESULTING IN race inequality at board level.

1247 - NHS 111 Telephony Overflow Mk2

IF national telephony monitoring introduce Mark2 of the NHS111 Telephony overflow system to divert calls away from providers struggling with call answering to providers with a good performance THEN this could have the potential to destabilise that provider RESULTING IN poor delivery of clinical performance, contracted KPIs and a poor patient experience.

4.2.2 Risks on the CRR reduced since the previous Trust Board Meeting

919 Resuscitation training and competency

IF there is a failure to deliver training and assess that all front line clinicians are adequately trained and competent to deliver basic life support and delivery of safe and effective defibrillation on a regular basis THEN inadequate resuscitation may be provided during cardiac arrest RESULTING in patient harm or death.

Monitor at PGB level

1097 – South Performance

IF Cat 2, 3, 4 South performance is not within 90th centile THEN there are delays in responses RESULTING IN potential deterioration and adverse patient outcome.

1200 – Tranman System

IF the new Tranman system does not seamlessly interface with Purchase to Pay(P2P) THEN work orders raised by Fleet will not transfer to Oracle RESULTING in the delay of payment to suppliers due to the inefficiency of manual input by Fleet and Finance colleagues.

Action plan progressing so risk reduced.

4.2.3 Risks removed from CRR since the previous Trust Board Meeting

696 – Fit testing - provision of respiratory protection

IF the Trust does not provide effective RPE for Operational A&E staff THEN the Trust will be non-compliant with the Control of Substances Hazardous to Health Regulations (COSHH) and Personal Protective Equipment (PPE) Regulations RESULTING in the exposure of staff to hazardous substances / infectious diseases which may lead to cases of ill health and legal action

RPE now in place within operations.

4.2.4 Emerging risks

1242 - Climate Change

Operational risks associated with issues arising from extreme weather events (heatwaves, cold, flooding etc).

This risk has been scoped and mitigating actions identified to inform future Trust plans.

Mental Health provision by police support

A review of Mental Health provision by the police within the East Ridings region could have an impact on capacity and demand on the Trust.

Paramedic Workforce

There is an emerging risk to the future sustainability of the YAS Paramedic workforce arising from increasing future employment of Paramedics in Primary Care and other roles across the wider system. Proposals are being developed to support a managed approach to workforce supply.

Moving and Handling training

There is a potential risk regarding the suitability of the moving and handling training for frontline operational staff. An external review has been commissioned to determine the level of risk this may pose to the Trust.

Statutory and Mandatory Risk

There is a risk being framed relating to the consistency and comprehensiveness of Statutory and Mandatory training provision across roles and staff groups. This includes reference to Trust induction, bank staff compliance and management of staff who appear to have missed key elements of training. The functionality of ESR and validity of staff ESR records are important underpinning processes.

Clinical Waste

There is a re-emerging risk regarding the effectiveness of existing supplier / contractual arrangements for managing clinical waste. In addition, there is an increased focus on the segregation and disposal of waste which will require the organisation to review its arrangements to ensure future compliance.

6. PROPOSALS/NEXT STEPS

- 6.1 Review of the Corporate Risk Register will continue at each meeting of the Risk and Assurance Group, with monthly updates to Trust Management Group.
- 6.2 Review of the BAF and CRR will continue via the quarterly cycle through the Trust Board and its Committees.
- 6.3 During December and January the BAF will be updated with Q3 progress reports and the risk exposure trajectories reviewed on the basis of this information.

7. RECOMMENDATIONS

- 7.1 It is recommended that the Board:
 - Notes the latest position regarding the Board Assurance Framework for 2019/20
 - Notes that during December and January the BAF will be updated with Q3 progress reports

- Notes changes to the Corporate Risk Register and gains assurance from the robust processes in place to manage risk

8. APPENDICES/BACKGROUND INFORMATION

- 8.1 Appendix 1: Board Assurance Framework 2019/20, including Q2 progress updates
- 8.2 Appendix 2: Corporate Risk Register