

Board of Directors

Report

Subject: Report of the Board Risk Committee

Date: 30th September 2016 Author: Paul White, Risk Manager

Lead Director: Peter Herring, Managing Director

Executive Summary

The Board Risk Committee (BRC) met on 22nd September 2016. This paper summarises the matters agreed by the Committee for reporting to the Board of Directors:

- The Trust has received a Significant assurance rating in the recent internal audit of Risk Management carried out by 360 Assurance; actions to implement the report's recommendations have been agreed, are being reported through to the BRC and are due to be completed by the end of October
- The Board Assurance Framework (BAF) was reviewed and it was agreed that risks impacted by the revised merger timescales should be re-assessed
- The BRC reviewed the Significant Risk Report and received confirmation that there
 are currently no operational risks within divisional and corporate service risk registers
 scoring 15 or more
- Based on risk register entries the most common cause of risk within the Trust at present is staffing within clinical services. A summary of the main areas of clinical staffing risk is provided below:

Medicine Division:

- Stroke medical staffing. Reliance on locums who it is becoming increasingly difficult to recruit
- Geriatrics medical staffing. Difficulties recruiting and retaining Geriatric consultants in particular
- Clinical Haematology medical staffing. Junior doctor shortage, reliance on cross cover from Cardiology & Respiratory
- Neurology medical staffing. No longer taking new patient referrals. Working collaboratively with NUH to build a sustainable service
- Respiratory medical staffing. Study leave, annual leave, on calls and teaching activities which mean there may be insufficient junior doctors available at times

Women & Children's Division:

 Paediatrics – nurse staffing. Use of bank & agency staff where possible and a rolling recruitment programme

Surgery Division:

 Trauma & Orthopaedics – nurse staffing. Difficulties recruiting, reliance on bank & agency staff



Diagnostics & Outpatients Division:

- Radiology radiologist staffing. Use of bank / agency radiologists where possible & work on-going with NUH through diagnostic work-stream.
- Reportable risks (those scoring 10 or more) were presented by Medicine Division and Women & Children's Division as part of the rolling Work Programme, enabling the BRC to gain assurance as to the growing effectiveness of risk management practices within the Trust

Recommendation

The Board of Directors are asked to receive and note this report from the Board Risk Committee.



Relevant Strategic Priorities (please mark in bold)		
Ensure the highest standards of safe care are consistently delivered by, and for, individuals, teams and departments	Ensure that patients experience the very best care, building on good practice and listening and learning from both negative and positive feedback and events	
Provide timely access to diagnosis, treatment and care when people need it and safely reduce the time patients spend in hospital	Raise the level of staff engagement through strong leadership, communication, feedback and recognition	
Reduce the scale of our financial deficit by reducing costs, improving utilisation of resources and productivity, and achieving best value for money Work in partnership to keep people in the community, and enable their return as soon as they are ready to I hospital		
Develop and implement a programme of work in conjunction with Nottingham University Hospital NHST to create a new combined organisation		

How has organisational learning been disseminated	Through management teams, internal governance structures and the use of the Datix risk register.
Links to the BAF	All BAF Risks are reviewed by the BRC.
Financial Implications/Impact	None specific to this report.
Legal Implications/Impact	None specific to this report.
Partnership working & Public Engagement Implications/Impact	None specific to this report.
Committees/groups where this item has been presented before	Board Risk Committee.