

Risk ID: 2610	Risk owner: Robbins, Mark	Risk Committee: Board
Directorate: Trustwide	Date recorded: 01/09/2017	
Specialty: Finance and Resources Directorate	Anticipated completion date: 31/03/2019	
Clinical Group: Trust Wide	Handler: Robbins, Mark	

Risk Title: 2018/19 Cost Improvement Plans

Risk description: There is a risk that the Trust doesn't fully identify plans to recurrently deliver the £3m savings target for 2018/19, and the result would be that this could contribute to the Trust being financially unsustainable in the future.	Principle Trust Objective: Be a sustainable organisation
	Source of Risk: Risk assessment

Progress:
 [Robbins, Mark 27/12/18 11:58:40] Delivery against the plan continues at the expected level with no changes to the forecast position previously reported. Non-recurrent budget savings have been identified to mitigate the expected in-year shortfall in delivery.

Assessor's recommendations:
 There will be additional focus on non-recurrent opportunities and identifying potential already committed investments

Scoring				Current: High
Current:	L	C		
	Possible - 3	Major - 4	12	
Target:	Unlikely - 2	Major - 4	8	
Last:			12	Change: No Change

Significant Hazards:
 Continued demand of Trust's services, with increasing cost pressures and restricted additional funding.

Controls in place:
 Early in the Q2 the Trust started its CIP governance processes to begin identifying potential CIP ideas. CIP is embedded in CCS Business Usual processes and is reported to Clinical Operational Boards, Executive Programme Board and Strategic Change Board.
 There will be an extensive review of contract income and cost to identify services that indicate they are not financially viable to continue to be delivered within current funding and expenditure structure
 The finance team work closely with senior service colleagues to identify savings opportunities including any budget savings which will be assessed and allocated to CIP recurrently or non-recurrently as appropriate to mitigate shortfall in deliver.
 Monthly review of all discretionary expenditure will take place to reduce or delay where possible without any adverse impact on service quality

Risk ID: 2257	Risk owner: Robbins, Mark	Risk Committee: Board
Directorate: Trustwide	Date recorded: 05/01/2016	
Specialty: Finance and Resources Directorate	Anticipated completion date: 31/03/2019	
Clinical Group: Trust Wide	Handler: Robbins, Mark	

Risk Title: Financial sustainability due to loss of contract income

Risk description:
 There is a risk that the Trust becomes financially unsustainable through a combination of events such as:

- Failure to secure contract extensions
- Failure to secure new business opportunities
- Loss of business through procurement
- Decommissioning o

Principle Trust Objective:
 Be a sustainable organisation, Provide outstanding care

Source of Risk: Risk assessment

Progress:
 [Robbins, Mark 27/12/18 12:04:34] Initial planning guidance has been issued which provides some details of what to expect in the full financial planning guidance due in January 2019. A paper is being presented to the Board on 9th January. Progress continues following further CIP 19/20 discussions and schemes will be developed over the next few months for agreement by the Board in March 2019.

Assessor's recommendations:
 The Trust will ensure it continually reviews its business plans to possibly flex as required to additional opportunities not previously considered.
 This is informed by initial "Horizon Scanning" of opportunities, and initial evaluation and assessment of p

Scoring				Current: Moderate
Current:	L	C		
	Unlikely - 2	Moderate - 3	6	
Target:	Unlikely - 2	Moderate - 3	6	
Last:			6	Change: No Change

Significant Hazards:

1. The finances of the NHS are under strain and each of the STP footprints that the Trust works within are financially challenged.
2. A high proportion of the Trust's income come from public health commissioners, and they have seen a 4% recurrent reductio

Controls in place:

1. The Trust reviews the quality of the tenders it submits pre and post submission, continues to identify potential growth areas, and closely monitors commissioner intentions and relationships.
2. Engagement with relevant commissioners in relation to decommissioning linked to Public Health funding reductions is ongoing.
3. robust data management to ensure patients contacts and activity is sound and up to date
4. engagement with all commissioners about contract extensions
5. engagement with CCG and NHS England commissioners to ensure "best place" of CCS to continue to provide services beyond current 2 year contracts

Risk ID: 2636	Risk owner: Pisani, Anita	Risk Committee: Board
Directorate: Trustwide	Date recorded: 30/10/2017	
Specialty: Not Applicable	Anticipated completion date: 01/02/2019	
Clinical Group: Trust Wide	Handler: Pisani, Anita	

Risk Title: Reduction in Staff Morale could adversely affect the delivery of high quality care

Risk description:
There is a risk that the delivery of high quality care will be adversely affected if levels of staff morale reduce.

Principle Trust Objective:
Be an excellent employer, Provide outstanding care

Source of Risk: Meetings

Progress:
[Pisani, Anita 31/12/18 16:26:47] National Staff Survey now closed. 59% response rate achieved which is above average when compared to others completing the survey. Formal results expected late Feb/early March 2019. Results from local friends and family survey shared with Service Directors and HR leads to ensure local improvement plans updated. Feedback from staff continues to compare favourably with national data. No change to scoring at this time, will review when formal staff survey results received.

Assessor's recommendations:
- Ensure that improvement plans for improving the working environment are being delivered across all teams - assurance received from Service Directors that local actions/improvements are being delivered

Scoring				Current: Moderate
Current:	L Unlikely - 2	C Moderate - 3	6	
Target:	Unlikely - 2	Moderate - 3	6	
Last:			6	Change: No Change

Significant Hazards:
N/A

Controls in place:

- Annual Staff Survey and delivery of improvement plan
- Quarterly staff friends and family surveys and delivery of improvement plan
- team level staff conversations with resulting action plan for improvements
- Appraisal levels
- 1:1s and team meetings
- Quality Early Warning Trigger Scores
- Clinical Operational Boards
- Freedom to Speak Up Guardian role in place
- Guardian of Safe Working role in place to support our junior doctors. Regular reports to Trust Board.
- GMC survey feedback
- Raising Matters of Concern process and log
- Bespoke leadership and team development put in place as and when required
- Deloitte external review of well-led - feedback

Risk ID: 1320	Risk owner: Curtis, Ms Julia	Risk Committee: Board
Directorate: Trustwide	Date recorded: 12/02/2014	
Specialty: Not Applicable	Anticipated completion date: 31/03/2019	
Clinical Group: Trust Wide	Handler: Curtis, Ms Julia	

Risk Title: Services fail to remain compliant with CQC standards

Risk description:
There is a risk that Services fail to remain compliant with the CQC Fundamental Standards Framework, leading to patient safety incidents, regulatory enforcement action and reduction in confidence from the public and commissioners in specific services.

Principle Trust Objective:
Provide outstanding care

Source of Risk: External assessment

Progress:
[Curtis, Julia Ms 21/12/18 16:26:57] Risk reviewed, remains same level.
48/52 Self assessments completed with overall rating of Good. Increased number of service level KLOE rated 'outstanding'
External visit to assess similar community trust undertaken and learning being incorporated into our plans.

Assessor's recommendations:
Quality review programme pilots completed now business as usual Programme to include patients and experts from the other NHS organisations once established.
Strengthen Patient engagement activity and governance arrangements.
Services to review action plan

Scoring				Current: Moderate
Current:	L	C		
	Rare - 1	Major - 4	4	
Target:	Rare - 1	Major - 4	4	
Last:			4	Change: No Change

Significant Hazards:
Teams fail to understand key actions needed to maintain CQC compliance with regulations - eg standards of recordkeeping, compliance with Trust policy, estates issues

Controls in place:
Annual Comprehensive review of service compliance through self assessments against Key Lines of Enquiry
Quality Early Warning Trigger Tool monthly returns.
Quality Reports to operations boards and to the Board.
Back to the floor visits.
Quality Review visits. External Quality reviews ie Deloitte July 2018
Quality strategy Updates to QIS Com and Board.
Introduction of CCS Quality Way - launched June 2017.
CQC assessment - rated 'Good' April 2018
Monthly CQC liaison meeting
Staff feedback
Whistleblowing and raising concerns process
Feedback from commissioners

Risk ID: 2897	Risk owner: Thomas, Gill	Risk Committee: Board
Directorate: Trustwide	Date recorded: 12/12/2018	
Specialty: Not Applicable	Anticipated completion date: 30/06/2019	
Clinical Group: Trust Wide	Handler: Thomas, Gill	

Risk Title: The UK leaves the EU with no agreed deal or with a limited deal

Risk description:
There is a risk that the UK leaves the EU with no agreed deal or with a limited deal resulting in disruption to and delays in imports, fuel shortages, travel disruption and food shortage

Principle Trust Objective:
Provide outstanding care

Source of Risk: Risk assessment

Progress:

Assessor's recommendations:
Implement above controls

Scoring				Current: High
Current:	L	C		
	Likely - 4	Moderate - 3	12	
Target:	Likely - 4	Moderate - 3	12	
Last:				Change: New Risk

Significant Hazards:
Failure by the government to agree customs arrangements after 29 March, 2019

Controls in place:

- (a) Medicines – continuity of supply being secured by central government by asking suppliers who import medicines from EU to stockpile 6 weeks supply
- (b) Vaccines – continuity of supply being secured by PHE
- (c) Supply of medical devices and clinical consumables – central government ensuring increase in national stock levels
- (d) Supply of non clinical goods, consumables and services – central government liaising with all national providers
- (e) Internal task and finish group established to identify areas of risk with a focus on local suppliers of non clinical goods, consumables and services and where necessary put in place contingency arrangements
- (f) Communication plans with staff and patients are being developed
- (g) Contingency plan being developed for prioritisation of access to fuel in a time of shortage
- (h) Working across the system to coordinate an assessment of the impact and put in place contingency arrangements

Risk ID: 2776	Risk owner: Winn, Matthew	Risk Committee: Board
Directorate: Trustwide	Date recorded: 26/06/2018	
Specialty: Not Applicable	Anticipated completion date: 01/11/2019	
Clinical Group: Trust Wide	Handler: Winn, Matthew	

Risk Title: Uncertainty linked to the new NHS funding settlement and the drive for greater provider efficiencies.

Risk description:
There is a risk that the organisation, services and staff face instability as NHS Improvement resorts to structural changes in the NHS Provider sector to drive greater provider efficiency.

Principle Trust Objective:
Be an excellent employer, Be a sustainable organisation, Collaborate with other organisations, Provide outstanding care

Source of Risk: External assessment

Progress:
[Winn, Matthew 02/01/19 17:13:00] 02.01.19
1. Scoring remains unchanged
2. Anticipated closure date has been extended to 01.11.19 as the NHS plan has not been published; the new regional director for the East of England will not be in post until April 2019 and the validity for any provider side changes will need to be articulated within system plans and these are not being finalised until the Autumn of 2019.

Assessor's recommendations:
1. follow up from the meeting of Chairs of community providers with Dido Harding to discuss how NHS community services are provided (Nicola Scrivings to lead)
2. Continue to be part of policy development through NHS Providers, to ensure integrated care is

Scoring				Current: High
Current:	L Possible - 3	C Major - 4	12	
Target:	Unlikely - 2	Major - 4	8	
Last:			12	Change: No Change

Significant Hazards:
The agreement on the NHS five year funding settlement is coupled with assumptions that the provider and commissioner structure needs to change and become more cost efficient. Therefore NHS Improvement will be introducing a new director role of provider re

Controls in place:

1. Executive and non-executive director influencing the leadership of NHS England and NHS Improvement
2. The Trust is a member of the Community Network - lobbying to focus the policy on integration, not organisational form issues
3. Board strategy development sessions in the year will discuss options available to the organisation
4. Continue to develop collaborative and integrated solutions for children services in Cambridgeshire/Peterborough and in Norfolk and for adult services in Luton.
5. Involvement in the development of the new NHS plan
6. Private conversations/influencing with NHS leaders at NHS Improvement
7. Working with the other 22 Community NHS Trusts who would be impacted by the risk issues.
8. membership approaches on influences via NHS Providers and NHS Confederation - executive and non-executive levels.

Risk ID: 2748	Risk owner: Pisani, Anita	Risk Committee: Board
Directorate: Trustwide	Date recorded: 05/04/2018	
Specialty: Not Applicable	Anticipated completion date: 30/03/2019	
Clinical Group: Trust Wide	Handler: Pisani, Anita	

Risk Title: Workforce Challenges affecting ability to maintain high quality care

Risk description: Due to the increase number of services facing workforce challenges there is a risk that the Trust is unable to maintain high quality care across the organisation.	Principle Trust Objective: Be an excellent employer, Provide outstanding care
	Source of Risk: Meetings

Progress:
[Pisani, Anita 31/12/18 16:34:59] A variety of teams continue to report workforce challenges, however, mitigations or plans in place to ensure quality of care is maintained. Services have recently updated their Care Quality Commission self-assessments and the majority are reporting good or outstanding across the five domains. Score reduced due to recent self-assessments and reduction in 18 week breaches. QWETT scores continue to be reviewed and discussed within clinical operational boards to ensure pressures understood and action identified to reduce pressure points.

Assessor's recommendations:

- Complete workforce planning conversations at service level to be reported to the Board in November 2018 - Completed and report being presented at today's meeting.
- Further work to be undertaken with teams on developing new roles and embracing new lea

Scoring				Current: Moderate
Current:	L	C		
	Unlikely - 2	Moderate - 3	6	
Target:	Unlikely - 2	Moderate - 3	6	
Last:			12	Change: Decreased

Significant Hazards:
0

Controls in place:

- Monthly workforce information sent to all Service Directors identifying turnover; sickness; stability index.
- Bi-annual workforce reviews with all service areas that identify particular workforce issues/challenges and mitigating actions
- Quality dashboard
- Quality Early Warning Trigger Tool feedback
- Raising Matters of concern process and log
- Staff side chair identified as confidential link for bullying/harassment
- Live Life Well action plan
- Workforce Race Equality Action Plan
- Staff conversations
- Bespoke recruitment campaigns where identified
- Local Recruitment and Retention Premia in place
- Staff Survey results and local action plans
- Care Quality Commission inspection March/April 2018 - Overall Good in all 5 key lines of inquiry.
- clinical prioritisation taking place in areas where patients are waiting longer than they should be - this is happening for both Community Paediatrics and Audiology in Luton.