

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 05/11/18 10:14:59] As of Month 6 the Trust has delivered 100% to the phased plan. The schemes identified for the year provide a FYE which is above the total plan but the forecast in year delivery for 18/19 is below the required amount. Non-recurrent savings continue to be identified to mitigate the shortfall to ensure no adverse impact on the overall financial target

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

Scoring				Current: High
Current:	L Possible - 3	C 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 of services
- Unable to mitigate amber and red rated risk schemes
- The impact of the Public Health grant cuts without a corresponding change in contracted activity levels
- Need to identify efficiencies and CIP's for 2018/19 and 2019/20

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

Source of Risk: Risk assessment

Progress:
 [Robbins, Mark 05/11/18 10:20:07] CIP discussion taking place at Wider Exec on 13th November, to identify main workstreams and organizational dependencies to support successful realization schemes. Real term growth allocation for 19/20 is nationally 3.6%. The Trust will establish the impact of this when planning guidance is published in December 2018.

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 potential new business using agreed assessment criteria. The Trust will also need to review new risks to its income as they arrive, including mitigating the funding pressure on its Children's service in Luton, with continued discussions with the Luton Borough Council to agree a service specification which is affordable within the current suggested financial envelope.

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 reduction in their national grant which they are passing onto providers
3. therefore the Trust needs to be careful that contract income is matched by changes to activity levels, otherwise the organization will potentially be asked to undertake the same work, for less money and the impact could well be reduced levels of quality care.

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 02/11/18 18:28:35] National Staff Survey 2018 currently taking place and closes on 30th November 2018. As at 2nd November 2018 we have achieved a 44% response rate, which compares favourably to the average for our survey provider of 33%. Results expected late February/early March 2019. 16 individuals have come forward to be Freedom to Speak Up Champions across the Trust. Training will take place by year end. A variety of different leadership development programmes taking place to support our service redesign/improvement programmes and projects. Most recent Joint Consultative Negotiating Partnership meeting was positive. No change to scoring at this stage.

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	C		
	Unlikely - 2	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:
2014/16 no. 1 - Quality: Safe services

Source of Risk: External assessment

Progress:
[Curtis, Julia Ms 04/11/18 14:27:52] Recent CQC reports from other organisations with similar service portfolio identified and currently being reviewed to determine any relevant learning - this will be considered against our service profile.
Learning from taking part in other providers' internal inspections to be collated and applied to our services, systems and processes.

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 plans following self assessments.
Consider recent CQC inspection reports relating to similar trust service portfolio to establish any learning then review relevant CCS services in line with this.
Consider learning from participation in other providers' internal inspections.

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: 2776	Risk owner: Winn, Matthew	Risk Committee: Board
Directorate: Trustwide	Date recorded: 26/06/2018	
Specialty: Not Applicable	Anticipated completion date: 01/03/2019	
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 19/10/18 14:10:18] 19.10.18:
1. Likelihood reduced to a score of 3, as the likelihood of the risk being realised in 2018/19 financial year has reduced
2. the latest financial planning guidance for 19/20 is supporting a steady state and attempting to reduce any shocks in the next financial year
3. hence whilst the risk is still live, the likelihood of it materialising in this financial year is less.

Assessor's recommendations:
1. Chairs of community providers to meet 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 prioritised in the national funding allocations process (Matthew Winn to lead)
3. Continue to prove efficiency and effectiveness in line with NHS Improvement Carter team recommendations (Mark Robbins to lead)
4. further development of the new models of care in children and older people services (anita pisani to lead)

Scoring				Current: High
Current:	L	C		
	Possible - 3	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-configuration. As the Trust is relatively small compared to other NHS organisations, it is susceptible to a national re-configuration mind set and policy, irrespective of our current productivity and efficiency levels.
Any major re-organisation could impact on the whole income base of the Trust (£130m).

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

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 02/11/18 18:35:17] Trust is no longer breaching national 6 week diagnostic standard, however, are still breaching 18 weeks within our Community Paediatric Services in Luton. Breaches reducing and the service is forecasting compliance by January 2019. Workforce Planning conversations have taken place with all services and a number of actions identified and in train to address our various workforce challenges. Extra resources have been agreed to support services with their strategic workforce planning and supply challenges. No change to scoring at the current time.

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 learning opportunities to enable individuals to progress to registrant roles. This continues as work in progress. Executive have agreed to appoint to a new post which focusses on Workforce Planning and Supply.
- Work with Higher Education Institutes on developing appropriate educational options for different career paths

Scoring				Current: High
Current:	L	C		
	Likely - 4	Moderate - 3	12	
Target:	Unlikely - 2	Moderate - 3	6	
Last:			12	Change: No Change

Significant Hazards:

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.