

<b>Risk ID: 2610</b>	<b>Risk owner: Robbins, Mark</b>
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**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 could be that this could contribute to the Trust being financially unsustainable in the future.

**Principle Trust Objective:**  
 Be a sustainable organisation

**Date recorded:** 01/09/2017

**Anticipated completion date:** 31/03/2019

**Handler:** Robbins, Mark

**Progress:**  
 [Robbins, Mark 27/02/18 12:54:30] The review of opportunities continues, including the need to identify additional schemes within the Luton Services. This has impacted slightly the target to have 100% of schemes identified by March 2018, and non-recurrent opportunities will be identified to mitigate in the short term. The latest position of schemes identified to date will be included in the 18/19 budget paper to be signed off by the Board in March 2018 and it is expected in excess of 90% of savings opportunities will be identified

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

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

**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

<b>Risk ID: 2257</b>	<b>Risk owner: Robbins, Mark</b>
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**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 2017/18

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

**Date recorded:** 05/01/2016

**Anticipated completion date:** 31/03/2018

**Handler:** Robbins, Mark

**Progress:**  
 [Robbins, Mark 27/02/18 16:59:20] The forward business planner for the next 6 months of retention and new business opportunities has been discussed and resource planning is now in progress to ensure the Trust can support the additional procurement demands.  
 Impact of the Beds Community new services is a £17.5m increase in income taking overall income for 18/19 to £125m, and therefore above the indicative £75m organizational sustainable total previously agreed.

**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	6	
	Unlikely - 2	Moderate - 3		
Target:	Unlikely - 2	Moderate - 3	6	
Last:			6	Change: No Change

**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

<b>Risk ID: 2636</b>	<b>Risk owner: Pisani, Anita</b>	<b>Principle Trust Objective:</b> Be an excellent employer, Provide outstanding care
<b>Risk description:</b> There is a risk that the delivery of high quality care will be adversely affected if levels of staff morale reduce.		<b>Date recorded:</b> 30/10/2017
		<b>Anticipated completion date:</b> 30/03/2018
		<b>Handler:</b> Pisani, Anita

Scoring				<b>Current:</b> Moderate
<b>Current:</b>	<b>L</b>	<b>C</b>	6	
	Unlikely - 2	Moderate - 3		
<b>Target:</b>	Unlikely - 2	Moderate - 3	6	
<b>Last:</b>			9	<b>Change:</b> Decreased

<p><b>Progress:</b> [Pisani, Anita 28/02/18 12:47:50] Staff Survey results now received. 29 indicators - above average with 17 indicators being the best when compared to peers. This includes our staff engagement score and our staff recommending us as an employer. Although as with all surveys/feedback there is room for improvement, current risk score has been reduced as over 59% of our staff completed the survey. Results will be presented at Leadership Forum on 12th March; Public Board meeting 14th March and the HR team will work with Services on developing their local improvement plans based on service specific feedback. Partnership Trust wide improvement plan will also be updated to take account of feedback. Major area of focus will be on the reduction of physical violence towards our staff from patients and public and on reducing bullying and harassment incidences.</p> <p><b>Assessor's recommendations:</b> - 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</p>
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<p><b>Controls in place:</b></p> <ul style="list-style-type: none"> <li>- Annual Staff Survey and delivery of improvement plan</li> <li>- Quarterly staff friends and family surveys and delivery of improvement plan</li> <li>- team level staff conversations with resulting action plan for improvements</li> <li>- Appraisal levels</li> <li>- 1:1s and team meetings</li> <li>- Quality Early Warning Trigger Scores</li> <li>- Clinical Operational Boards</li> <li>- Freedom to Speak Up Guardian role in place</li> <li>- Raising Matters of Concern process and log</li> <li>- Bespoke leadership and team development put in place as and when required</li> </ul>
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<b>Risk ID: 2730</b>	<b>Risk owner: Pisani, Anita</b>
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**Risk description:**  
 There is a risk that due to the potential ambiguity of partnership arrangements with other organisations, responsibility and accountability for the delivery of services may be unclear.

**Principle Trust Objective:**  
 Collaborate with other organisations, Provide outstanding care

**Date recorded:** 28/02/2018

**Anticipated completion date:** 01/04/2019

**Handler:** Pisani, Anita

Scoring				Current: High
Current:	L	C	9	
	Possible - 3	Moderate - 3		
Target:	Rare - 1	Moderate - 3	3	
Last:				Change: New risk

**Progress:**

**Assessor's recommendations:**  
 review whether other Trust Board level discussions/involvement needs to be in place for all collaborative arrangements

**Controls in place:**  
 Partnership working with Cambridge and Peterborough NHS Foundation Trust - Board to Board meetings; Getting agreed governance arrangements in place and approved by both Boards in March 2018.  
 Partnership working in Luton system - Provider Alliance Memorandum of Understanding in place for scoping work. Will need to be updated when moving to implementing the plan to be clear on governance arrangements for each piece of work.  
 Partnership working with East London Foundation Trust - formal sub-contract will be in place prior to commencement of the contract on 1st April 2018 and joint partnership board set-up. Exec to Exec sessions booked in May and November 2018.

<b>Risk ID: 1320</b>	<b>Risk owner: Sirett, Ms Julia</b>
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**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

**Date recorded:** 12/02/2014

**Anticipated completion date:** 30/03/2018

**Handler:** Sirett, Ms Julia

**Progress:**  
 [Sirett, Julia Ms 27/02/18 18:05:09] Score unchanged. Quality review visits established - subsequent areas for improvement have not affected judgements of 'Good' to date.  
 Weekly oversight of Quality Improvement Plan by Executive Team and Subject Expert leads.

**Assessor's recommendations:**  
 Weekly review of 'good house keeping' action plan.  
 Quality review programme underway. 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.

Scoring				Current: High
Current:	L	C	8	
	Unlikely - 2	Major - 4		
Target:	Rare - 1	Major - 4	4	
Last:			8	Change: No Change

**Controls in place:**  
 Comprehensive review of service compliance through self assessments against Key Lines of Enquiry - review against revised KLOE due.  
 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 reviews  
 Quality strategy Updates to QIS Com and Board.  
 Introduction of CCS Quality Way - launched June 2017.