ENCLOSURE 3

Ref:08/09/public/A10/V1

Birmingham Women's NHS
NHS Foundation Trust

SUBJECT :	Corporate Amber Risk Register and Assurance Framework
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CONTEXT AND BACKGROUND FOR REPORT

Amber Risks are reported to the Board of Directors on a 2 monthly basis in order to provide assurance to the Board that risk is being managed effectively within the Trust.

KEY ISSUES FOR THE BOARD OF DIRECTORS' CONSIDERATION AND DECISION

The Board are asked to consider the revised Amber Risk Register and Assurance Framework.

The Board's attention is drawn to updates in the register highlighted in red.

RECOMMENDATIONS

The Board are asked to note the updates.

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Birmingham Women's NHS
NHS Foundation Trust

Combined Corporate Amber Risk Register and Assurance Framework

17/09/08

Incident Month July/August

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Description and definitions:

The Purpose of NHS Assurance Frameworks

The purpose of a NHS Assurance Framework should be to provide Boards with a single, focused, ***iterative*** process that generates a unified evidence base showing progress towards achieving its organisational aim (i.e. a Patient Led NHS).
It incorporates the following elements:

- What the organisation aims to deliver **(corporate objectives)**
- The factors which could prevent these objectives being achieved **(principal risks)**
- The significance of the principal risks **(impact)**
- The processes in place to manage those principal risks **(controls)**
- The extent to which the controls will reduce the likelihood of a risk occurring **(likelihood)**
- The evidence that appropriate controls are in place and operating effectively **(assurance)**
- The gaps in control and assurance **(action)**
- The level of challenge from Board members to satisfy themselves that risks are being reasonably managed to meet objectives **(challenge and disclosure)**

'The Standards for Better Health: Improving Board Assurance'. Healthcare Standards Unit, April 2006

Distribution of Corporate Risks.

Almost Certain 5		3	5		
Likely 4				2	
Possible 3			7	7	1
Unlikely 2					
Rare 1					
	Insignificant 1	Minor 2	Moderate 3	Major 4	Catastrophic 5

8 Amber risks were added to the register in September.

Amber Risks Mapped to Corporate Objectives

No amber risks have been mapped to the current Corporate Objectives.

Amber Risks Mapped To Healthcare Commission Standards

No amber risks have been mapped to the Standards.

Domains:-

1. **Safety**
2. **Clinical and Cost Effectiveness**
3. **Governance**
4. **Patient Focus**
5. **Accessible and Responsive Care**
6. **Care, Environment and Amenities**
7. **Public Health**

Timeline for variation in Corporate Amber Risk scores
In the last 12 month period (August 2007 – July 2008)

Risk Ref/ Date 1st appeared on amber register	Target Reduction Date	Aug-07	Sep-07	Oct-07	Nov-07	Dec-07	Jan-08	Feb-08	Mar-08	Apr-08	May-08	Jun-08	Jul-08
TRUS 0296 07.06.05		9											
TRUS 0309 14..02.06		12											
TRUS 0355 01.03.07		9											
TRUS 0356 01.03.07		12											
TRUS 0358 01.03.07		**12**											
TRUS 0361 01.03.07		**9**											
TRUS 0364 01.03.07		**12**											
TRUS 0371 01.03.07		**10**											
TRUS 0378 31.05.08											**8**		
TRUS 0109 31.05.08													**9**
TRUS 0379 31.05.08													**12**
TRUS 0149 31.05.08													**12**
TRUS 0145 31.05.08													**9**
TRUS 0146 31.05.08													**9**
TRUS 0150 31.05.08													**10**
TRUS 0151 31.05.08													**10**
TRUS 0152 31.05.08													**10**

Corporate Amber Risk Profile

ID	Risk Description and update	No. of reported incidents in July/August	Risk Owner
TRUS 0296	Staff not attending mandatory training.	0	Director of Workforce & Facilities
TRUS 0309	Patient safety could be compromised due to non compliance of sterile services contract standards.	0	Associate Director for Clinical Support
TRUS 0355	National planning assumptions around inflation uplifts, tariff (HRG 4), pay, allocations, MPET etc, prove inaccurate. Unknown impact on Trust income and expenditure.	0	Chief Executive
TRUS 0356	Regional reconfiguration of services Instability within maternity services across the West Midlands could lead to sudden changes in services that would leave unmet demand. Potential impact of Lord Carter of Coles (2006) report on pathology services	0	Chief Executive
TRUS 0358	Failure or delay in achieving annual savings requirements - LTFM demonstrates need for efficiencies in addition to standard annual CRES. Limits scope for investment in further service development. Trust will breach in terms of authorisation as an FT.	0	Director of Finance & Information
TRUS 0361	Ad hoc changes in expenditure in year due to a change in situation. Imbalance between income and expenditure profiles	0	Director of Finance & Information
TRUS 0364	Failure to deliver improvements and efficiencies required to meet 18 week target waiting times within budget. Trust would receive significant financial penalty Failure would adversely impact on Trust reputation. Trust may breach terms of authorisation as an FT	0	Director of Nursing and Midwifery

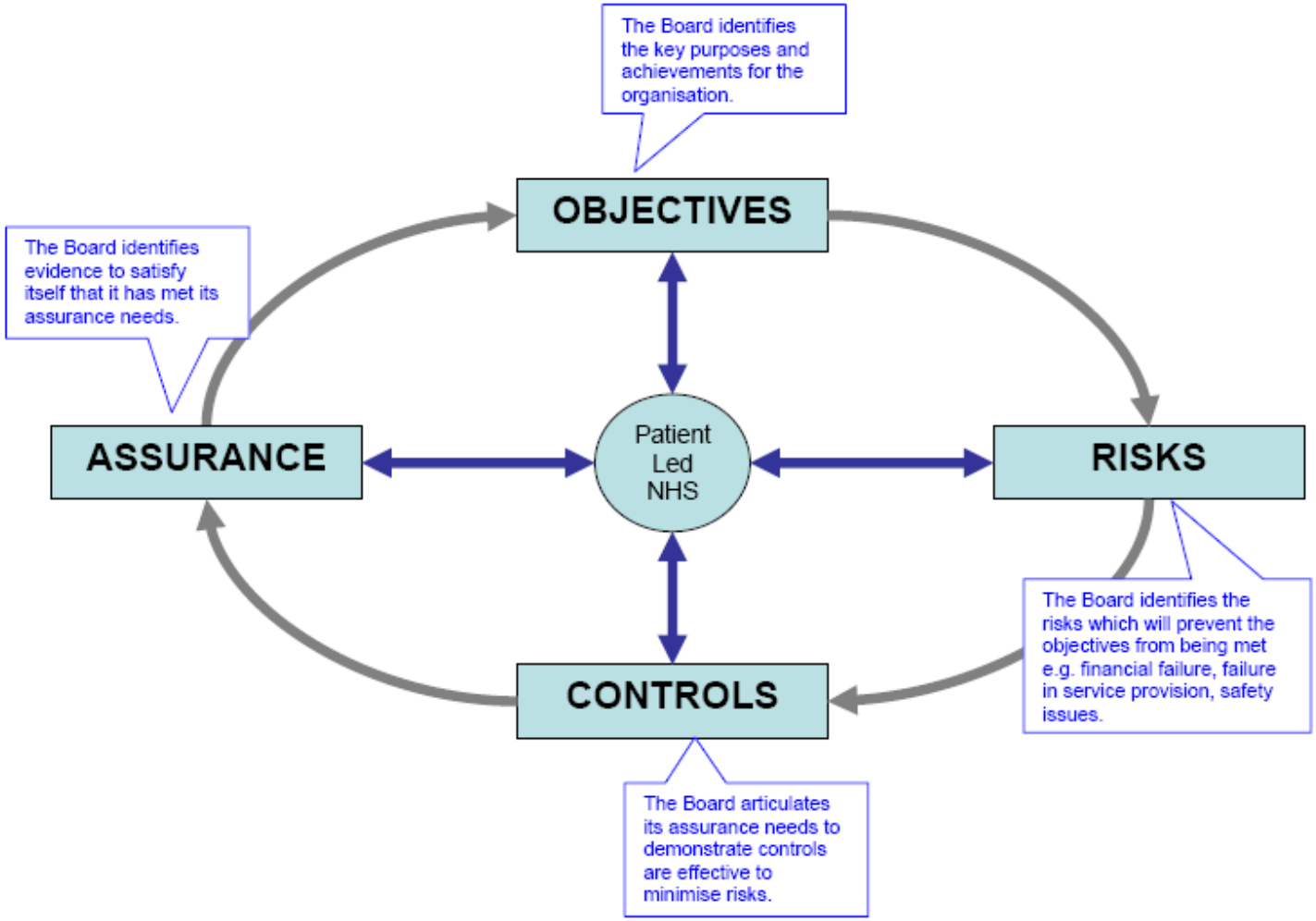
TRUS 0371	PAS critical failure or major system outage. Sudden service failure could result in Trust failing to maintain clinical service delivery, with possible adverse impact on patient care and Trust reputation	0	Director of Finance & Information
TRUS 0378	Failure to comply with requirement to monitor Junior Doctor's working hours. Failure could result in and impact upon patient care and to the Trust being required to increase intensity payments to the Junior Doctors	0	Associate Director of HR
TRUS 0109	Responsiveness of facilities/estates depts to infection control issues. • Ensure better links between stakeholders; ward & department managers must take responsibility for monitoring their areas & be aware of how to escalate unresolved issues	0	Director of infection Control & Prevention, Professional Heads of Nursing/Midwifery, Head of Facilities
TRUS 0379	The Consultant Microbiologist cover with BCH may be affected following the departure from post by one of the consultants in October • Advertisement placed for Locum; approval sought from BCH for appointment of replacement - to be considered 15 Sep 08	0	Director of Infection Prevention & Control
TRUS 0149	Failure to introduce MRSA screening for all elective maternity cases by March 2009 • Staff training • day-to-day monitoring by Infection Control Team • compliance audits planned and underway.	0	Clinical Director Maternity
TRUS 0145	Level 3 Neonatal Intensive Care Unit for the Southern West Midlands Newborn Network comprising Hereford, Worcester, Heart of England NHS Foundation Trust, Good Hope and Solihull Hospitals, City and Sandwell receiving ex- utero transfers from the	0	Clinical Director - Neonatal

	Network, Birmingham Children's Foundation Trust & occasionally from outside the Network area. Risk of healthcare associated infections from these outside areas • Isolation measures (standard for isolation within NNU & Trust IC policy) • Microbiology screening • Communication to parents & all healthcare professionals & allied services Implemented.		
TRUS 0146	Sick newborn babies, both term and preterm, receiving intensive and high dependency care receiving invasive procedures & the use of indwelling devices at risk of acquiring infection. • Policies in place for the insertion, care & documentation of indwelling devices. Audits of the same. • Audits planned inline with DH/ICNA • Hand Hygiene audits planned	0	Clinical Director - Neonatal
TRUS 0150	Fabric of the delivery suite environment is in poor repair and therefore difficult to clean. List of problems requested by estates department and supplied by manager	0	J. Henry
TRUS 0151	Bathrooms on delivery suite in poor repair. Ongoing refurbishment programme in place	0	J. Henry
TRUS 0152	Open top inappropriate storage of equipment in delivery rooms. Storage currently has open topped buckets. New storage to be purchased to cover all stocks.	0	J. Henry

- **Assurance Levels** The adequacy of assurance levels for the following risks was not recorded:-

TRUS 0355
TRUS 0356
TRUS 0358
TRUS 0361
TRUS 0364
TRUS 0371
TRUS 0378
TRUS 0109
TRUS 0379
TRUS 0149
TRUS 0145
TRUS 0146
TRUS 0150
TRUS 0151
TRUS 0152

Model for Structured Assurance



from *'The Standards for Better Health: Improving Board Assurance'. Healthcare Standards Unit, April 2006*