

Appendix one – Summary of draft Risk Management Strategy and transformation work underway

1. The Trust's current Risk Management Strategy was approved by the Board on 30 September 2013 and is due for review in September 2016.
2. As the approved Strategy is a lengthy document having evolved over more than a decade, it has become less accessible, and has now therefore been rationalised and reduced to 26 pages, for clarity and accessibility to all, as risk management is of course the responsibility of all staff.
3. The revised draft Strategy has been through consultation, including presentation to the Quality & Performance Committee for consideration, where it was approved, and circulation to other members of the Strategic Management Team. It covers the Trust's systems for the reporting, assessment and management of risks via the Risk Register and the Board Assurance Framework, and individual, Board, Assurance Committee, Directorate, Specialty, and Ward/Locality responsibilities.
4. The draft Strategy provides for the principle vehicles for oversight and assurance in connection with the business of the Trust, and describes the process by which risks are assessed, graded, managed, and monitored via the Risk Register and Board Assurance Framework.
5. The draft Strategy describes the Trust's commitment to ensuring that the needs of patients, staff, volunteers, contractors and visitors are taken seriously at every level of the organisation, providing open and transparent risk management systems to ensure that the Trust meets its principal strategic objectives, for safe and sustainable, high quality care.
6. The draft Strategy supports a dynamic and proactive approach to risk management, to identify and manage potential threats and hazards before adverse events occur. Every risk identified and associated assessment carried out is seen as a care quality improvement opportunity.
7. The draft Strategy acts as a reminder that risks are inherent in all Trust activities, for example, treating patients, determining service priority, project management, record keeping, communication, staffing, service design, developing strategies, or deciding not to take any action at all.
8. The draft Strategy describes the Risk Management Training programme for all staff, including enhanced training for managers with responsibility for risk identification, reporting and management via Datix.
9. Review of Risk Register and Board Assurance Framework – the draft Strategy proposes that:
 - the Trust Board review the risk register – risks graded 15 and above – at every third meeting, alternating with Board Assurance Framework review and Board confirm and challenge meetings;
 - the Audit Committee review the risk register – risks graded 15 and above – bi-annually, and the Board Assurance Framework bi-annually;

- the Trust Programmes Board review the risk register – Trust Programme risks graded 15 and above – quarterly, and the Board Assurance Framework bi-annually to review Trust Programme risks;
- the Quality and Performance Committee review the risk register – risks graded 15 and above, and any poorly controlled risks graded 10 - 15 at every other meeting, alternating with the Board Assurance Framework;
- the Finance, Business and Investment Committee review the risk register – Finance, Business and Investment risks graded 15 and above quarterly, and the Board Assurance Framework bi-annually to review Finance, Business & Investment risks;
- the Risk Committee review the risk register – risks graded 15 and above, and any poorly controlled risks graded 10 - 15 at every other meeting, alternating with the Board Assurance Framework;
- Directorates, Services/Specialties, and Wards/Localities review risk registers as a standing agenda item at every monthly meeting.

10. The draft Strategy requires that all RR and BAF reviews, by all forums, are challenging of risk descriptions and action plans undertaken, to ensure that risks are managed as far as possible for the safety of patients, visitors and staff of the Trust; and before close of each meeting, to minute new risks arising through discussions, to be added to the risk register.

11. Regrettably, the risk assessment and management training described in the Strategy has not been consistently delivered, and there are pockets of very low levels of risk assessment and risk management awareness, though training compliance is being addressed through wider Trust programmes of work.

12. Regrettably also, the Datix risk management system described within the Strategy is not as user-friendly as it could be, contributing to the current risk register containing a number of risks which are out of date, poorly described and inaccurately scored. Moderation and/or quality control of entries and updates to the risk register has not so far been part of the risk management process, and this is reflected in its current state. Interrogation of the Datix system for updates is difficult as many risks have not been updated, closed, or re-scored for some considerable time. Work is underway to:

- Review the content of risks upon the risk register; and
- Review the Datix Risk Register and BAF formats to improve risk management.

13. The draft revised Risk Management Strategy is presented to the Board for consideration, approval and adoption.

14. The Board and its members are asked to pass any observations, comments and/or questions they have about the draft Strategy to the Director of Clinical Governance as soon as possible.