Agenda item 19

KEY STRATEGIC OBJECTIVE 5 – HEALTHY LIVES

EXECUTIVE OWNER: **Medical Director**
RESPONSIBLE COMMITTEE: **Quality Committee**

DATE LAST REVIEWED: **October 2020**
NEXT REVIEW SCHEDULED: **November 2020**

Strategic Objective
To support our patients to improve their health and clinical outcomes

Risk Appetite
We have a **LOW** risk appetite for risks that might compromise the delivery of outcomes for our patients
We have a **HIGH** risk appetite for Clinical Innovation that does not compromise the quality of care.
We have a **MODERATE** risk appetite for actions and decisions taken in the interest of ensuring quality and sustainability which may affect the reputation of the Trust.

Initial Risk Rating: 4(C) x 3 (L) = 12
Current Risk Rating: 4(C) x 3 (L) = 12
Target Risk Rating: 6-10
Risk Behaviour: MINIMAL - CAUTIOUS

Principal Risk – 2760 (12)

There is a risk that the Trust is unable to adequately support our patients to improve their health and clinical outcomes

Rationale for Current Risk Score
- No significant risks currently aligned to the achievement of this objective, however, risk grading at 12 reflects current position relating to Clinical Audit, NICE guidance and clinical guidelines
- Trust HSMR and SHMI within expected ranges
- HEE/GMC action plan complete and conditions lifted
- HEE risk rating improved from ISF3 to ISF2
- Weekend and overall HSMR increased outside of control limits

Emergent Risks
- Local health inequalities may affect patients' abilities to improve their health and achieve best possible health outcomes
- Increasing non-elective and Covid related demand may increase the planned activity
- The Research lead plans to resign – interviews held in October 2020

Aligned Significant Risks
No Significant Risks currently aligned to this principal risk

Future Opportunities
- Development of health promotion strategy
- Development of smoke free hospital site
- Increased STP joint working to improve local health outcomes
- Improving position on Clinical Guidelines and NICE Guidelines
- Medical Examiner Officer in October 2020
- External review of mortality by NHSI learning from deaths collaborative in October 2020.

Controls in Place and Assurance
- Participation in national and local Clinical Audits
- Process in place to review and update policies in accordance with required timescales
- Trust exceeding expectations regarding participation in clinical research. Trust has fastest clinical trial set-up time in the region. The Trust has exceeded the annual target for NIHR trials. (1000 research accruals in first 6 months of 2020/21
- Research governance framework in place
- HEE/GMC action plan complete and 3 GMC conditions lifted, awaiting formal feedback from HEE visit on 21 August 2020
- CCG rating of IPAC improved from amber to green October 2020
- 35 Trust staff have completed Quality Improvement & Service Re-design (QISR) training
- Full Medical Examiner Team in place reviewing 100% in patient deaths
- External support from NNUH for End of Life Care in place from 20 August 2020

Gaps in Control and Assurance
- Weekend and overall HSMR above expected levels
- Some Trust policies remain out of date
- Clinical Audit function
- Bowel and breast screening on hold (nationally) so screening targets will be harder to achieve
- Maternity Transformation programme on hold (nationally)
- Endoscopy capacity reduced to Covid IPAC recommendations

KEY STRATEGIC OBJECTIVE 6 – HEALTHY LIVES

EXECUTIVE OWNER: **HR Director** | **DATE LAST REVIEWED:** **October 2020**

RESPONSIBLE COMMITTEE: **People Committee** | **NEXT REVIEW SCHEDULED:** **November 2020**

Strategic Objective

To maximise opportunities for our staff to achieve their full potential so that the Trust can deliver outstanding care

Risk Appetite

We have a **MODERATE** risk appetite for decisions taken in relation to workforce.

Initial Risk Rating: 4(C) x 3 (L) = 12
Current Risk Rating: 4(C) x 3 (L) = 12
Target Risk Rating: **12-16**
Risk Behaviour: CAUTIOUS

Principal Risk – 2761 (12)

There is a risk that Trust leaders are unable to maximise opportunities for staff which could impact on the ability of staff to deliver outstanding care

Rationale for Current Risk Score

- No Significant Risks currently aligned to the achievement of this objective
- Trust achieving safer staffing levels
- Most workforce related KPIs below trajectory, e.g. sickness, mandatory training and appraisal rates
- National workforce shortages in key clinical areas
- A Nurse staffing review relating to the COVID pandemic was undertaken and although a gap against anticipated activity was identified actual activity was less than projected, the gap did not materialise, and any risks associated with nurse staffing have been successfully mitigated

Emergent Risks

- COVID-19 risks related to staff sickness, mental health and wellbeing Difficulties in recruitment and retention for EU nationals now UK has left EU
- Poor trust reputation may affect ability to recruit and retain staff
- Local health inequalities may affect staff's abilities to achieve potential

Aligned Significant Risks

No Significant Risks currently aligned to this principal risk

Future Opportunities

- Overseas recruitment campaigns
- Further development of staff benefits to encourage healthy lifestyles e.g. car sharing incentives, bicycle loan purchase
- Further development of flexible and forward-thinking employment policies

Controls in Place and Assurance

- The development of an Integrated Workforce Plan to be aligned with corporate and clinical strategy
- Leadership Strategy developed, including Divisional Leadership Programme restarted in July 2020, Band 7, Band 6 and 5 development programmes planned to restart in Summer 2020
- Training programmes in place at different levels of the organisation, including training for Quality Improvement practitioners
- There is a plan to bring all HR / Workforce policies in date – there is a Policy Review Group in place chaired by the Director of Strategy
- COVID staff risk assessments are being undertaken
- Safer staffing levels being achieved, daily escalation and process in place to ensure safe staffing
- Recruitment pipeline management in place and compliance with standards monitored. Time to recruit has reduced by a third from over 100 days to 62.5 days (at May 2020).
- Local recruitment events programmed
- Strengthened staff health and wellbeing programme with focus on emotional wellness in place

Gaps in Control and Assurance

- Staffing resource in the HR department may affect development and delivery of key trust strategies and policies
- Workforce KPIs below trajectory
- Occupational Health recall systems ineffective and manual process in place
- Lack of effective and consistent mechanisms for addressing poor performance
- COVID staff risk assessments