	BAF Ref	CQC compliance	ID	Sources	Opened	Title	Risk Description	Existing Controls	Consequence (current)	Likelihood (current)	Rating (current)	Progress/Action Required	Rating (Target)	Review Date	Clinical Group	Service Line	Responsible Lead	Executive Lead
1	1b	26 4 6	752	DRR	23/02/2010	Potential for Trust QIPP Programme to fail due to the reliance on external agencies and Primary Care for Support	Reliance on Primary Care Providers and Social Services for assistance in the speedy discharge process and admissions avoidance will result in a breach of the 4 hour wait initiative and extended length of hospital stay for up to 3 weeks for patients who are assessed as fit to be discharged. This happens on a daily basis. This will result in lost revenue due to the the blocked beds, this in turn will jeopardise the maximisation of the cost improvement programme.	Meeting between trust, social services, community unit and PBC to agree new discharge process and arrangements for integrated working. July 11 - Service improvement team recruited and plans to review pathways with clinicians agreed as part of the Lean project. Nov. 2011 - monthly QIPP meeting with PCT to monitor progress with local plans.	4	5	20	Aug 12 as part of winter planning further meetings with Social Services community unit. CCG planned as part of POD 19. Oct 12 currently 77 delayed discharges within the Trust affecting elective work and patient flow. Majority waiting for package of care. Weekly Silver and Gold calls set up from 19/10/12 with CEO and West Norfolk CCG, NCHC and Norfolk Social Services . Nov 12 Senior officers from CCG will be carrying out a site visit on week commencing 5th November to assess the situation. Dec 12 Actions from the visit for the Urgent Care Network are in progress with good engagement from Clinical and Executives. **January 2013 experiencing great difficulties in capacity**	8	01/03/2013	Medical Services Group	Trust Wide	Cursty Pepper	Mark Henry