

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

SBAF risks by assurance level: January 2021

SBAF risk number	Risk description	Responsible Board Committee	Executive Lead	Current Assurance level	Route to Adequate*
2	Collapse in local care home provision arising from commercial pressures and immigration policy increases SWBH admissions and reduces patterns of discharge creating pressures on acute hospital beds.	Quality and Safety	Rachel Barlow	LIMITED	<p>The assurance level can be improved with the following measures:</p> <ul style="list-style-type: none"> Understanding nursing home capacity and barriers to accepting patients on a daily basis. Exploring direct access options with the possibility of wrap around support to achieve increased access to beds. Analysis of DTOC numbers with BCC to determine if they include patients who are unable to be discharged due to a lack of housing. <p>We would expect that this information will take until March 2020 to collate with partners</p>
3	There is a risk that difficulties in recruiting and retaining local GPs leads to fragmentation within practice and PCNs and unpredicted patterns of referral behaviour and LTC emergency care, resulting in unmet demand or need because our system is not operating to its 5 year plan.	Trust Board	Rachel Barlow	LIMITED	<p>The assurance level is presently assessed as “Limited” due to the lack of information about GP recruitment and retention numbers. This information has recently been received from the CCG. A workshop in January 2020 will map out the workforce plan, partnership and joint working status and the retention strategy in a heat map. This will be considered with a view to the associated plans proving a revised assurance status in February 2020 which is anticipated to provide adequate assurance</p>
4	There is a risk that vulnerable service improvement plans are delayed by a lack of cross organisational cohesion or pace, leading to service failures	Quality and Safety	David Carruthers	LIMITED	<p>Work is underway to define what constitutes a vulnerable service for SWBH in terms of staffing metrics, waiting list and other relevant data. Once defined, vulnerable services within SWB will be identified and individual service plans will be created to prevent the service deteriorating further. Plans will include identifying</p>

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	necessitating either emergency changes to service models or patients not being able to access services within the STP footprint.				innovative ways of working including technological opportunities and driving the identification of vulnerable services across the Black Country STP. This work will be completed by December 2019 with a view to adequate assurance being provided by January 2020 .
5	There is a risk that organisational learning does not improve with “welearn” sufficiently to address our quality improvement ambitions, resulting in the Trust not sustaining a Good rating after 2020	Quality and Safety	Kam Dhami	LIMITED	<p>The absence of a data set that covers the various elements of the welearn programme is a current gap in control that when addressed will provide the Quality and Safety Committee with greater assurance that the programme is progressing as intended. Interview for the new post of Deputy Director of Governance – Knowledge and Learning are taking place in February</p> <p>The programme will take time to embed within the Trust and produce results but an assurance level of adequate is achievable by March 2020</p>
7	There is a risk that not all partners will sign up to the practicalities of the ICP vision and resist change including personnel change, resulting in a hiatus and loss of trust which could imperil our ability to make changes of importance to the long term care model our communities need.	Trust Board	Dave Baker	LIMITED	<p>There is also a commitment to six deliverables by March 2020. These are:</p> <ul style="list-style-type: none"> • Increased detail around governance (before Christmas); • Conclusions around risk and capitated budgets (before Christmas); • Key findings from baseline mapping and data (before Christmas); • Formation of the other groups in the architecture (before end of March 2020); • Detailed action plans to deliver the outcomes (before end of March 2020); • Initial plans as to how all National organisational metrics will be overseen by the Alliance to sit alongside a fully capitated budget (before end of March 2020);

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8	There is a risk that the immediate pressures that drove the development of our Digital Plan was and is not sufficiently agile and responsive to end-user needs, resulting in a gap between intention and practice over the next three years.	Digital MPA	Martin Sadler	LIMITED	<p>The Digital Plan is essential to describe how the organisation will utilise Information Technology over the coming years to both transform our services and support integrated care across Sandwell and West Birmingham.</p> <p>In October 2019, the CIO presented the Digital Ambitions plan to CLE. This was subsequently presented to the private board in November 2019, with the aim of describing how we shall create a Digital Plan for all. Both CLE and the Board commented that the Digital Ambitions plan must include input from our stakeholders including our staff, patients, primary care colleagues, stakeholder organisations and industry tech leaders within the NHS. Additionally, it should also consider local clinical/business strategies and national guidance.</p> <p>The timetable has been reviewed by DMPA and will be monitored by Digital Committee and DMPA on a monthly basis. However, this will not improve assurance until a document in draft is available later in February 2020.</p>
10	There is a risk that the mechanism for contracting and payment in the NHS caused by a failure of national bodies to require adoption of capitation based contracting will result in the Trust not achieving its aim to be the best integrated care provider in the NHS by not allowing money to flow freely around our local system.	Finance and Investment	Dinah Mclannahan	LIMITED	<p>This risk is presently rated as red (high). The goal is for the risk to reduce in risk score to medium (amber) by January 2020. If that is not achievable then the Board will be asked to consider whether it wishes to tolerate the continued level of risk, and what further mitigation could be put in place by the Executive Leads to achieve a risk reduction. It is under review by the interim Director of Finance and is anticipated to reduce to its target score by March 2020.</p>

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11	There is a risk that labour supply does not match our demand for high quality staff, because of low training numbers or overseas options for students, and therefore we are unable to sustain key services at satisfactory staffing levels resulting in poorer outcomes, delayed delivery or service closures.	People and OD	Raffaella Goodby	LIMITED	<p>The risk has been reviewed to ensure that key data is reviewed and actioned through the assurance process. In addition, the following work has already been identified as required and is underway:</p> <ul style="list-style-type: none"> Market review so that there is sufficient knowledge of internal pressures and external competitors and their impact on our employment offer. Market analysis of the attractiveness of SWB as a place to work for different professional groups and the senior operational workforce (risk of retirement profile). Forward look of what the workforce will look like in 5/10 years' time. <p>The above actions are timetabled to be complete by December 2019. Once in place, they might provide adequate assurance of the effectiveness of the controls/assurance process for the risk.</p> <p>Note: Following review at POD on 24th January, it is planned that this risk will move adequate assurance by the end of March.</p>
12	There is a risk that we do not create the time for our employees to develop over the next two years, and that we are less able to deliver our community based, public health focused model of care at the same time as opening Midland Met.	People and OD	Raffaella Goodby	LIMITED	<p>As with SBAF 11, a review process has taken place to ensure that key data is reviewed and actioned through the monitoring process. In addition, the following work has already been identified as required and is underway:</p> <ul style="list-style-type: none"> Analysis of return on investment data in training spend and how it contributes to organisational effectiveness/rostering improvements. Analysis of whether the focus on UNITY is creating pressure points in other developmental areas. An equality assessment to ensure equality of access to learning

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					<p>and development.</p> <ul style="list-style-type: none"> A PDR analysis of highly talented individuals. <p>The above actions are also timetabled to be complete by December 2019. Once in place, they might provide adequate assurance of the effectiveness of the controls/assurance process for the risk.</p> <p>Note: Following review at POD on 24th January, it is planned that this risk will move adequate assurance by the end of March.</p>
16	There is a risk that strategic initiatives and the Trust's digital ambitions will not be achieved as a result of the unreliable Informatics infrastructure, the lack of digital/technical skills, the lack of business owner involvement or customer insight, and inappropriate third party support arrangements which may lead to a lack of faith in Informatics and a lack of timely engagement with them and the inability to achieve the improvement we are seeking.	Digital MPA	Toby Lewis	LIMITED	The infrastructure and IT service provision needs to be fit for purpose to allow the Trust to realise its digital ambitions. It is essential the IT Management have the skills and experience available at their disposal to resolve any issues as they arise and implement new digital services to support transformation. In addition we must have known business owners of the systems we use to ensure they are embedded into how the organisation operates. The timetable detailing the activity and objectives has been reviewed by DMPA and will be monitored by Digital Committee and DMPA on a monthly basis
17	There is a risk that we do not automate our processes, standardise them safely and reduce errors and duplication	Digital MPA	Rachel Barlow	LIMITED	This risk is presently rated as red (high). The controls have been updated in light of Unity going live. The goal is for the risk to reduce in risk score to medium (amber) by January

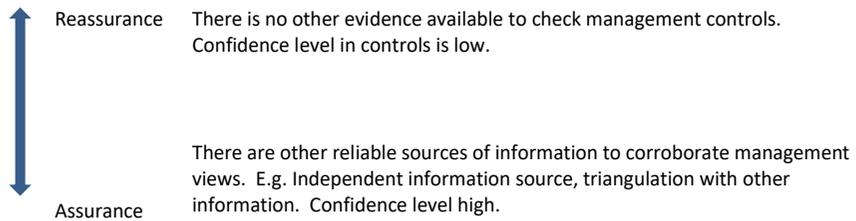
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	because not all our staff develop and retain the necessary skills and confidence to optimise our new electronic patient record (Unity).				2020 . If that is not achievable then the Board will be asked to consider whether it wishes to tolerate the continued level of risk, and what further mitigation could be put in place by the Executive Leads to achieve a risk reduction.
18	There is a risk that implementation of changes to commissioning in West Birmingham prevents the Trust and partners from delivering a common approach to integrated care for all patients using Midland Met resulting in operational deficiencies after the opening of the hospital.	Trust Board	Toby Lewis	LIMITED	This risk relates to boundary issues and purchasing models. Beyond leverage there is little that can be done to reduce risk. A quantification of the impact of change is included in the Final Business Case for Midland Met. It is envisaged that “Limited” assurance will remain through Q4.

A level of **adequate** assurance has been approved by the relevant Board Committees for the following risks:

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1	There is a risk that management bandwidth does not match organisational and system wide ambition because of either recruitment or capability difficulties, leading to project delays that compromise our improvement trajectory to meet our undertakings and ambitions.	People and OD	Toby Lewis
6	There is a risk that we will not secure or sustain a Midland Met Final Contractor owing to approval delays, resulting in further confusion about the future model and leading to employee flight and service sustainability difficulties in acute care.	Estates MPA	Alan Kenny
9	There is a risk that our necessary level of cash backed cost reduction and income and expenditure plans are not achieved in full or on time, compromising our ability to invest in essential revenue developments and inter-dependent capital projects.	Finance and Investment	Dinah Mclannahan
13	There is a risk that we do not deliver improved mental health and wellbeing across our workforce because our interventions are not targeted at those at prospective risk, resulting in absence and teams not being able to deliver to their full potential.	Public Health	Raffaella Goodby
14	There is a risk that we are unable to achieve our qualitative and quantitative goals for research because we do not broaden the specialties that are research active, principally because we are unable to recruit personnel and provide time and infrastructure to deliver commercial, CRN, and personal research, thus limiting research translation from science to practice.	Quality and Safety	David Carruthers
15	There is a risk that strategic initiatives and the Trust's digital ambitions will not be achieved as a result of the unreliable Informatics infrastructure, the lack of digital/ technical skills, the lack of business owner involvement or customer insight, and inappropriate third party support arrangements which may lead to a lack of faith in Informatics and a lack of timely engagement with them and the inability to achieve the improvement we are seeking.	Quality and Safety	David Carruthers
19	There is a risk that we are unable to sustain services on 2 sites until 2022 without service reconfiguration or investment in non-retained estate. This would compromise our ability to deliver seven day multi	Estates MPA	Rachel Barlow

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	professional services because locational alignment is not achieved concurrently.		

***Key – Assurance levels**



Zero	Indicates poor effectiveness – there is no assurance that the controls are working either way
Limited	Some assurances in place or controls are still maturing so effectiveness cannot be fully assessed but should improve
Adequate	Some issues identified that if not addressed, could increase the likelihood of the risk materialising.
Substantial	Controls are suitably designed, being consistently applied and are effective in practice.
No colour	Suggested assurance level not yet confirmed by responsible committee