

Report From: Chief Executive
To: Trust Board, 26th December 2006
Subject: Assurance Framework
Action: To Note Contents & Agree Recommendations

Introduction

The purpose of this paper is to provide the Trust Board with a summary of the process recently agreed at a recent Trust Risk Committee and Executive Team meeting on 12th January 2006, to ensure continual population; a review of recent developments to the Assurance Framework; and highlight most recent entries made.

Background Information

The Assurance Framework was first produced in March 2004 by the Chief Executive Officer and the Head of Quality and Risk in response to a paper produced by the Department of Health entitled "Building an Assurance Framework: A practical guide for NHS Boards ~ March 2003".

Since its inception, the Assurance Framework has been regularly reviewed to ensure it remains current. All versions of the Assurance Framework are archived to ensure a clear audit trail.

On 1st August 2005, the Head of Quality and Risk conducted a review of the Trust's Strategic Risk Management Processes and made recommendations that aimed to strengthen the Assurance Framework and escalation of Strategic Risks to the Trust Board. Following this review, the Risk Management Committee on 22nd September 2005 commissioned a further paper.

The aim of the subsequent paper produced on 13th October 2005 was to provide guidance as to Trust's interpretation of a strategic risk, describing the mechanisms that have been put in place to escalate high-level risks identified by the Divisions or Executive Team. The Risk Management Committee ratified this paper on 8th December 2005 and since then the process has been implemented.

The advantage of this new process ensures that the Assurance Framework becomes a living document as opposed to a paper exercise and since being agreed Strategic Risk entries added are preceded by being entered on to the Trust Risk Register beforehand. This then ensures the following:

- ◆ Executive Director agreement and recognition of proposed strategic risk
- ◆ Ability to cross reference from Assurance Framework to Risk Register and visa versa
- ◆ Completion of all action plans prior to being categorised as a Strategic Risk

To date this new process appears to be working well. Monitored closely, it is envisaged that the Assurance Framework will continue to be populated using this process eventually replacing previous risks identified with those that can be cross-referenced to the Risk Register. All newly

identified Strategic Risks will be escalated to the Risk Management Committee and consequently to the Trust Board.

Recent Developments

On 25th October 2005 in response to further guidance received from the Strategic Health Authority and the Department of Health, the Head of Quality and Risk aligned the Trust's Strategic Objectives within the Assurance Framework in conjunction with the Chief Executive with that of the Standards for Better Health. As a result of this alignment and to avoid duplication, a number of new objectives were added and six removed as follows:

Objectives Added	Objectives Removed
<p>2. There is a strategic process in place that ensures patient safety is enhanced by the use of health care processes, working practices and systemic activities that prevent or reduce the risk of harm to patients (Ref: SFBH Domain 1)</p> <p>4. There are joined up management responsibilities and ownership allocated appropriately at all levels of the organisation to ensure probity, quality assurance, quality improvement and patient safety (Ref: SFBH Domain 3)</p> <p>7. Ensure patients receive prompt, efficient and effective care and have choice in access to appropriate services and treatments (Ref: SFBH Domain 5)</p>	<ul style="list-style-type: none"> ◆ To develop excellent Customer care ◆ To encourage innovation and create a learning organisation ◆ To encourage all staff to take responsibility and become autonomous in their role ◆ To establish a continued focus on improvement in the Trust ◆ To respond to local communities ◆ To focus on acute care

The remaining objectives were subtly reworded to ensure a better fit with the Standards for Better Health. This did not have any impact upon their risks, key controls or assurances.

Since the revision, Objective 4 remains unpopulated. To date, there is no risk on the Risk Register that threatens this objective. This objective is likely to fall within the remit of the newly appointed Chief Operating Officer and will be addressed once in post.

The Trust Board is asked to agree and note these new objectives and consequently the revised Assurance Framework aligned with the Standards for Better Health.

New Risks Entries

During Q3 (Sept - Dec '05) the following entries were made on to the Assurance Framework:

Objective	New Risk Entry
2. There is a strategic process in place that ensures patient safety is enhanced by the use of health care processes, working practices and systemic activities that prevent or reduce the risk of harm to patients (Ref: SFBH Domain 1)	(2.1) Lack of capacity/financial resources to improve patient safety
	(2.2) Insufficient financial and consequently staffing resource allocated to the management of medical devices.
	(2.3) Lack of availability of certain Medical Devices
	(2.4) No funding in current budget to implement NICE recommendations
	(2.5) No financial resource within Q&R budget to manage Safety Alert Broadcasting System
	(2.6) Non-compliance of staff with infection Control Policies and Procedures
	(2.7) Lack of pressure relieving equipment (RR - ID 584)
7. Ensure patients receive prompt, efficient and effective care and have choice in access to appropriate services and treatment (Ref: SFBH Domain 5)	(7.1) Failure to achieve Emergency Care Targets (RR - ID 585)
	(7.2) Lack of access to Level two HDU Service (RR - ID 401)

The Trust Board is asked to agree and note these new risks entries on to the Assurance Framework.

Further Recommendation

The Assurance Framework was reviewed by Internal Audit on 10th January 06. They have made the recommendation that Objective 9 be removed from the framework since this is operational in nature and a national requirement.

The Trust Board is asked to agree the removal of this objective.

David Law
Chief Executive

15th January 2006