

**Integrated Risk and Governance Committee  
Thursday 16 September 2010**

**Summary to Board**

The Chair noted that further information was requested in relation to risks discussed within the Big Ask discussion at the previous meeting, but which were not directly linked to it.

The first related to ITU discharge issues and the Director of Delivery described the work being undertaken to improve bed management to minimise the risk of last minute or late discharges from the ITU. An outreach worker has been appointed to facilitate discharges but risks remain because of on going pressures on the bed pool that are likely to continue going into winter.

The risk of Single Sex Accommodation breaches in ITU is being addressed through the Critical Care Network. The Director of Delivery noted that direct risks to patients are not significant however in relation to late discharges from ITU, are a breach of NICE guidance. These risks need to be balanced against the risks to patients in need of ICU care.

The Women and Children's Division had been requested to provide an update on the risks and impacts of heat loss resulting from poorly fitting windows and single glazing in the maternity building which had been raised at the previous meeting. The Director of Strategy and Infrastructure wished to reiterate that this problem was not related to the constraints imposed through the Big Ask programme and that there had been no reduction in necessary maintenance in the building. The meeting was alerted to a recent review visit of Neonatal Services by the East of England SHA, which noted the high number of term babies admitted to the Special Care Baby Unit. It was noted that this might be due to the lack of a transitional area for babies in need of escalation of care but not special care. The Clinical Director for Women's and Children Division noted that a review has been initiated to determine whether there are any significant themes to be addressed and the findings will be reported to this group in November.

**High Level Risks – The Board Assurance Framework**

PD noted that the Audit Committee has reviewed the Framework and is satisfied with the progress is being made to strengthen its assurance function. The IRG Committee agreed the following:

- The risk relating to decontamination compliance to be downgraded.
- Lack of theatre storage facilities should be downgraded.
- The risk relating to the HDD should be closed as the HDD refresh is now completed and positive feedback was received.
- The risk relating to capital savings following the reconfiguration of services at Hemel Hempstead should also be closed.

The Director of Nursing requested that the risks to achieving the MRSA target should be escalated given that 3 had been reported with a trajectory of 5 to 31 March 2010 and this was agreed.

The Chair noted he had requested to the Company Secretary that the BAF should now inform the Board's agenda.

The Women's and Children's High Level Risk Register was circulated in line with the requirement for rotational review of key risks in divisions and that the issue discussed earlier

in relation to heating control was on the register. PD noted that subsequent to publication the Head of Midwifery advised of a risk relating to midwifery staffing levels and a need to re-appraise staffing models as a result of a significant overspend in the Division. It was agreed that this risk should be escalated to the Board Assurance Framework as it presented a significant financial cost pressure.

The risks to compliance with CQC registration were reviewed in relation to Outcome 10 (Safety and Suitability of Premises), for which the Trust is notifying a minor concern. The Director of Strategy and Infrastructure noted significant controls in place to manage a challenging agenda, which included a restructure of the division and the management team. The adverse findings from the Internal Audit review of Medical Devices Management were discussed and had been discussed at Audit Committee. It was noted that an action plan was in place and an external trainer will start on 27 September to address the training backlog. The Director of Strategy and Infrastructure was asked to provide an update on both these issues for the Board meeting.

The Committee received an update on progress in relation to the NHSLA assessment in which it was noted there remained a number of policies not yet completed and it was agreed that all policies should be completed by 1 October to enable their endorsement at the October BISE. The Committee heard about preparations in place to prepare wards for a possible site visit during the formal assessment in February 2011, which includes themed ward visits and briefing sessions. Concerns remain about the state of readiness for a Level II assessment, particularly given the need to demonstrate that policies are fully embedded in practice.

It was noted that there were concerns about the take up of mandatory training in relation to Vulnerable Adults and this had been discussed at the Adult Safeguarding meeting in September. A review of target groups for this training is underway to ensure training resources are focused on those requiring the training.

**Mahdi Hassan**

**Chair of IRGC**