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| <b>Report to:</b>       | Trust Board   |
| <b>Title of Report:</b> | Integrated Risk & Governance Committee Assurance Report to Board (IRGC) |
| <b>Date of meeting:</b> | 04 October 2016   |
| <b>Recommendation:</b>  | For discussion, noting  |
| <b>Chairperson:</b>     | Phil Townsend – Non-Executive Director & Vice Chair                     |

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| <b>Purpose</b>             | The report summarises the assurances received, approvals, recommendations and decisions made by the Integrated Risk & Governance Committee at its meeting on 4 October 2016.   |
| <b>Background</b>          | <p>The Committee meets monthly (bi-monthly from October 2016) and provides assurance to the Board on the:</p> <ul style="list-style-type: none"> <li>• Corporate Risk register (CRR)</li> <li>• Board Assurance Framework (BAF)</li> <li>• Quality Improvement Plan (QIP)</li> <li>• Risk management process maturity</li> </ul>   |
| <b>Business undertaken</b> | <ol style="list-style-type: none"> <li>1) New CRR entries and CRR entries being demoted. Discussion included gaining assurance on the decision making process relating to these risks.</li> <li>2) Review of risk management training and development programme</li> <li>3) Review of strategic risks for inclusion within the Trust risk register</li> <li>4) QIP progress report</li> <li>5) Review of BAF 2016-17</li> </ol>  |
| <b>CRR outcomes</b>        | <ol style="list-style-type: none"> <li>1) A new risk, 3786, relating to the emergency care pathway/patient flow was accepted onto the CRR by the Risk Review Group (RRG) on 16 September 2016 with a risk score of 16. This risk incorporates risk 3627 relating to outlying/surge patients causing increase to length of stay (LOS) &amp; patient safety risk and which the RRG agreed to close on 16 September 2016 given that it is incorporated into Risk 3786.</li> <li>2) Risk 3713 relating to gap in the statutory framework for DoLS was discussed at the RRG on 16 September 2016 and it was agreed to de-escalate to the risk to a risk score of 10 from 16.</li> </ol> |
| <b>Key decisions taken</b> | <ol style="list-style-type: none"> <li>1) The committee agreed the following proposed strategic risk entries onto the risk register with further discussion to take place on the remaining proposed risk entries submitted to IRGC:</li> </ol>   |

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|                                    | <ul style="list-style-type: none"> <li>• Deanery changes – risks to filling training grade posts in context of proposed switch from London to EoE rotations.</li> <li>• Commissioning landscape – multi-provider collaborative and capitation contracting models, collaboration / competition with GP federations, HCT, HPFT, L&amp;D etc</li> <li>• Long term redevelopment, access to capital, planning environment, link to Watford health campus.</li> <li>• Failure to capitalise on digital revolution – reducing long term competitiveness and viability</li> </ul> <p>2) The QIP, incorporating new actions identified from the CQC inspection September 2016.</p> <p>3) The BAF 2016/17 progress report on level of assurance was reviewed. The committee discussed and agreed the appropriate level of assurance for each principal risk. The committee agreed for the wording of PR3 and PR9 to be revised. The BAF is to be submitted for Board consideration and approval.</p> |
| <b>Issues to escalate to Board</b> | None to report  |
| <b>Challenges and exceptions</b>   | None to report  |
| <b>Future exceptional items</b>    | To be decided post CQC  |

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| <b>Attendance record</b>  |
| Chair (Non-Executive Director (Vice-Chair)<br>Director of Strategy & Corporate Services<br>Chief Information Officer<br>Head of Risk, Assurance & Compliance<br>Chief Operating Officer<br>Medical Director<br>Associate Medical Director for Clinical Standards & Audit<br>Trust Secretary<br>Non-Executive Director<br>Governance PA (taking notes) |