

ITEM: 12

MEETING:

Trust Board
21 March 2007

TITLE:

Trust Assurance Framework and risk management report 2007

SUMMARY:

This paper demonstrates that the overall risk management system in place across the Trust has continued to be developed to enhance its effectiveness. It also sets out updated policies and Assurance Framework for 2006/07.

ACTION:

The Trust is asked to note and ratify:

- Assurance Framework 2006/07
- Revised risk management strategy
- Revised terms of reference for the Assurance Committee

REPORT FROM:

Margaret Boltwood, Director of Human Resources & Corporate Affairs

SPONSORED BY:

Financial details supplied/checked by:

(Name of finance officer) [None applicable](#)

Recommendations contained within this paper have been checked for compliance with relevant statute and regulations/directions/policy as follows:

(Relevant law/direction etc.)

(Name) **Integrated Governance Handbook 2006**

Purpose of this paper

The aim of this paper is to demonstrate that the overall risk management system in place across the Trust has continued to be developed to enhance its effectiveness and to identify ways in which continuous improvement will be achieved over the next year. There are five sections to this paper:

- Continued development of risk management systems and processes over 2006/07
- Revised risk management strategy
- Revised terms of reference for the Assurance Committee
- Assurance Framework 2006/07
- Priorities for the Trust 2007/08

Continued development of risk management systems and processes over 2006/07

Assurance Committee

The Assurance Committee is a well-established committee which is chaired by Dee Henry, Non executive Director. It meets at least quarterly reviewing issues of particular significance to the Trust Board, whilst undertaking more detailed work in relation to risk management across the Trust. The issues it has reviewed include:

- Healthcare Commission standards assessment
- Assurance Framework
- Revised risk management strategy
- Serious untoward incidents
- Decontamination services
- Revised terms of reference

The Committee includes active lay membership which adds to the richness of the debate on issues, bringing the patient and carer's viewpoint to the discussion.

Decontamination Committee

The Decontamination Committee, chaired by the Director of Facilities has regularly reviewed:

- Decontamination performance indicators
- Decontamination incidents and reports
- Training plans

- Endoscopy processing unit performance
- Project plans to improve the delivery of sterile services on site and in the longer term provide decontamination services as part of the NW London delivery unit.
- Review of policies & procedures
- Review achievement of Serious Untoward Incident action plan

Clinical governance steering committee

This Steering Group has met on a monthly basis and is co-chaired by the Medical Director and the Director of Nursing & Clinical Development. It has addressed issues such as:

- NICE guidelines
- Clinical guidelines and protocols
- Reviewing progress of Essence of Care projects
- Findings of the national clinical surveys and enquiries
- Risk assessment of clinical research
- Infection control
- Research governance including patient consent
- Patient feedback, including surveys and complaints
- Child protection policies
- Education and development of staff
- Clinical risk management

Infection control Committee

This Committee is chaired by Anne Johnson, Non executive Director, and issues it has considered include:

- Review of the Code of Practice for Healthcare Acquired Infections
- MRSA & C.difficile infection rates
- Implementation of "Saving lives" report
- Staff training

Health and safety Committee

This Committee is co-chaired by the Director of Facilities and Director of Nursing & Clinical Development. It has considered such issues as:

- Incident and accident statistics
- Health and safety training
- Policies relating to health and safety issues
- A sub-committee have been established to address specifically fire safety
- A Security & Personal Safety sub committee has also been re-established.

The Health & Safety Executive undertook a two-week inspection of the Trust in February/March 2007. The initial feedback has been positive. Their report is awaited.

Revised risk management strategy

The changes last year in the way risk management is organised is now bedded in and the department of risk management is now managed by the Assistant Director of Nursing & clinical Development. The risk management strategy has been amended to reflect this and other minor changes (Appendix 1).

Assurance Framework 2006/07

The Assurance Framework, as a living document, has been revised through 2006/07 to ensure that it reflects the changing environment within which the Trust operates. The Assurance Committee has undertaken a detailed review of its contents on the Trust Board's behalf. It is therefore attached as Appendix 2 for the Board to ratify.

Revised terms of reference for the Assurance Committee

The Assurance Committee has reviewed and updated its terms of reference and these are attached for the Trust Board to ratify Appendix 3.

Priorities for the Trust 2007/08

- Address issues highlighted by the Health & Safety Executive following their inspection February/March 2007.
- Continue to monitor and learn from achievement of actions plans following Serious Untoward Incidents
- Continue to develop proposals to improve the delivery of decontamination services
- Continue to implement action plan to reduce healthcare acquired infections
- Continue to roll out training and use of root cause analysis and treatment plans
- Build on and enhance the assurance processes across the Trust in relation to health and safety issues.

The Trust Board is asked to note and ratify:

- Assurance Framework 2006/07
- Revised risk management strategy
- Revised terms of reference for the Assurance Committee