

ID	Committee	Open Date	Speciality	Risk Owner	Risk Type	Title	Description	Existing controls	Initial Rating	Current Consequence	Current Likelihood	Current Rating	Treatment Plan	Due date	Done date	Residual Rating	Next Review
1401	Safety	23/01/2013	Medical Director's Office	Holden, Des	Patient Safety	Risk of outbreak of viral gastroenteritis	Risk of outbreak of viral gastroenteritis (outbreak of diarrhoea and vomiting). Impact on patient safety and trust reputation. Has operational impact due to bed closures.	<p>D&amp;V policy</p> <p>Hydrogen peroxide system for terminal cleaning</p> <p>Use of Actichlor Plus for environmental cleaning</p> <p>Use of Tristel Jet for commode and bed pan cleaning</p> <p>Use of SEC Norovirus Toolkit</p> <p>Outbreak control Group</p> <p>Surveillance of diarrhoea and vomiting</p> <p>Stat and mandatory training</p> <p>Policy</p> <p>Communications messages to staff, visitors and patients</p> <p>Norovirus leaflets</p> <p>Hand hygiene facilities</p> <p>Restricted visiting</p> <p>Use of signs at entrance to wards and bays, and red aprons to facilitate communication that an outbreak is taking place.</p>	16	3	5	15	<p>Develop RAG rated system for terminal cleaning</p> <p>Audit terminal cleaning</p> <p>Implement ATP testing</p> <p>Trial and review of decontamination products in use in the Trust</p> <p>Improve hand hygiene products</p> <p>Implement Clinell wipes and improve education and training</p> <p>Dedicated internal norovirus planning meeting.</p> <p>Use of red aprons during outbreaks of D&amp;V</p> <p>Propose UV decontamination technology</p> <p>Meeting with stakeholders regarding norovirus preparedness</p> <p>Audit of post-outbreak cleaning</p> <p>Pilot Patient Hand Hygiene Champions in Elderly Care</p> <p>Stakeholders meeting to discuss health system norovirus planning</p> <p>Monitor ward refurbishment programme</p> <p>Monitor use of ED risk assessment for patients admitted with diarrhoea and/or vomiting</p> <p>Review of cleaning resource for enhanced cleaning during outbreak</p> <p>Stakeholder norovirus study day</p> <p>Prepare options appraisal for emptying bays to facilitate terminal cleaning following outbreak</p>	<p>31/03/2013</p> <p>30/06/2013</p> <p>01/04/2013</p> <p>30/06/2016</p> <p>30/11/2016</p> <p>23/12/2016</p> <p>02/09/2013</p> <p>31/03/2014</p> <p>09/12/2016</p> <p>31/03/2013</p> <p>20/03/2015</p> <p>01/03/2015</p> <p>22/09/2014</p> <p>30/03/2013</p> <p>31/03/2014</p> <p>31/03/2016</p> <p>25/09/2013</p> <p>31/01/2013</p>	<p>06/12/2013</p> <p>26/07/2013</p> <p>26/07/2013</p> <p>25/07/2016</p> <p></p> <p></p> <p></p> <p>02/09/2013</p> <p>11/02/2014</p> <p>31/10/2016</p> <p>06/12/2013</p> <p>22/02/2016</p> <p>05/05/2016</p> <p>22/09/2014</p> <p>26/07/2013</p> <p>21/05/2014</p> <p>29/04/2016</p> <p>25/09/2013</p> <p>26/07/2013</p>	9	31/03/2017
1491	Responsiveness	29/08/2013	ED - Adult	James, Alison	Involvement of Service Users	Failure to maintain Emergency Department performance	Failure to maintain Emergency Department performance because of lack of capacity in health system to manage winter pressures. This has a significant impact on the Trust's ability to deliver high quality care.	<p>1) EDD Patient Pathway</p> <p>2) Discharge management</p> <p>3) Plans for escalation areas agreed and management tools in place</p> <p>4) Reviewing all breaches on weekly to implement lessons learnt</p>	20	4	4	16	<p>Implementation of divisional escalation plan following key triggers.</p> <p>Escalation bed plan agreed implementation plans in place for each area.</p> <p>Ambulance handover escalation plan agreed and in place with new process for managing handovers agreed to maintain flow. Escalation to division with clear triggers in place.</p> <p>Weekly ED review meeting to review previous weeks performance and implement lessons learnt</p> <p>Plans in place to manage with reduced capacity during January through March 2016 whilst building works are underway.</p> <p>As described on the board assurance framework</p>	<p>01/12/2016</p> <p>30/09/2015</p> <p>01/09/2016</p> <p>01/09/2016</p> <p>31/12/2015</p> <p>31/03/2014</p>	<p>30/09/2015</p> <p>28/10/2016</p> <p>28/10/2016</p> <p>23/05/2016</p> <p>22/02/2016</p>	6	31/01/2017

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1603	Executive Committee	18/06/2014	Finance - Fin. Management	Simpson, Paul	Financial Management	Unable to deliver realistic medium term financial plan	As described on the BAF (5.3)	1) Items referred to in 5.A.1 and 5.A.2 above 2) V8.0 long term financial model (submitted to NHSi June 2016) and integrated business plan completed (submitted to TDA in February 2014) 3) NHSi Plan submitted 2016.	15	5	3	15	As described on the BAF	31/03/2017		8	31/03/2017
1604	Executive Committee	18/06/2014	Finance - Fin. Management	Simpson, Paul	Financial Management	Liquidity: Inability to pay creditors/staff resulting from insufficient cash due to poor liquid position	Risk of not being able to pay suppliers from insufficient cash due to poor liquidity problem	1) Bi weekly review of forward cash flow by finance team and CFO 2) Cash and working capital policy and strategy 3) Annual cash plan linked to business plan and capital plan	15	5	3	15	As described on the BAF	31/03/2017		12	31/03/2017
1663	Executive Committee	09/12/2014	Finance - Fin. Management	Simpson, Paul	Financial Management	Risk of not achieving Cost Improvement Plan	Risk of not achieving financial plan as a result of non-delivery of Cost Improvement Plans	i) Delivery of savings managed through PMO (on-going) ii) Agency management is subject to broader focus.	9	5	3	15	Treatment plan will vary according to CIP. i) Action plans to reduce shortfall. ii) Contingency within each area.	31/03/2017		6	20/12/2016
1678	Responsiveness	23/03/2015	Operations	Emly, Ben	Service Access	RTT Access Standards	Due to demand exceeding capacity and on-going operational pressures, the Trust cannot offer all services within the 18 weeks standards set out in the NHS Constitution. Longer waiting times result in poor patient experience, potential avoidable harm and increase the number of formal and informal complaints	1. Access Policy 2. Weekly PTL / performance meetings to monitor progress. 3. Service Level plans to increase capacity where required. 4. Operational plan for winter 2016/17 to support inpatient elective care	15	3	5	15	Manage the number of IPs booked on lists to avoid cancellations Improve Theatre Utilisation Ring-fencing of Tandridge and Woodland Wards	27/02/2015 20/06/2015 15/05/2015	09/02/2015 05/08/2015 18/09/2015	6	31/12/2016
1688	Executive Committee	20/05/2015	Finance - Fin. Management	Simpson, Paul	Financial Management	Risk of potential overspending from operational pressures	Risk of failure to meet the Trusts financial plan due to overspending.	i) Divisions to implement action plans and contingencies to control/or recover overspending. Specific action is required in all Divisions. ii) Agency PMO to deliver outputs in respect of reduced agency usage following recruitment. Position being reviewed (ongoing).	12	5	3	15	As described on the BAF.	31/03/2017		6	20/12/2016

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1689	Executive Committee	01/04/2015	Finance - Fin. Management	Simpson, Paul	Financial Management	Risk of Contract income below plan	Risk the Trust does not achieve its financial plan as a result of lower than planned contract income from capacity issues.	i) Continuation of 2015/16 actions around internal management and external management; the health system response will need to improve in 2016/17 and the basis of that is currently being navigated through SRG.	16	5	3	15	i) Output from productivity/LoS work. ii) Discussion with CCGs on resourcing a shared problem. iii) Contingency actions.	31/03/2017		8	20/12/2016
1779	Executive Committee	21/06/2016	Finance - Fin. Management	Simpson, Paul	Financial Management	Failure to delivery productivity gain from income growth	Risk to Trust overall financial plan as a result capacity issues reducing income and of not achieving productivity gain from income growth.	Continuation of 2015/16 actions around internal management and external management.	16	5	3	15	i) Action plans agreed through Productivity Group for various initiatives. ii) Additional budget allocated for additional posts (to allow productivity benefit).	31/03/2017		8	20/12/2016
1778	Executive Committee	21/06/2016	Finance - Fin. Management	Simpson, Paul	Financial Management	Non agreement of MRET baseline & no readmission penalty	Risk of non achievement of financial plan as a result of reduced clinical income from non agreement of the MRET baseline and penalty from readmission.	i) Pursue baseline review with CCGs. ii) Discuss national position and any Control Total reduction with NHSi.	12	5	3	15	As described on the BAF	31/03/2017		8	20/12/2016