

**BAF Risks & Issues  
OHSEL Board – 09/11/18**

The following risks and issues have been updated based on returns from STP programme leads and input from the OHSEL Board and Clinical Programme Board in October 2018.

1.	<p>a) BAF Risks</p> <p><b>STP_01 - 2018/19 Planning</b></p> <p><b>Risk level: 20</b></p> <p><u>Description:</u> Level of underlying financial risk across the STP system</p> <p><u>STP update:</u> Both provider and commissioner organisations are working to mitigate CIP and QIPP plan risks for 2018/19 and planning for 2019/20. Monthly financial position reported to OHSEL Board.</p> <p>This item originated as a 2018/19 specific planning risk. In practice it relates to financial sustainability. We therefore propose to reframe this risk as an issue and rename it to “System financial sustainability”.</p> <p><b>STP_02 – Risk to achieving Transformation</b></p> <p><b>Risk level: 20</b></p> <p><u>Description:</u> The collection of programme objectives for 2018/19 and beyond will not achieve the longer-term change envisaged in the original multi-year STP plan.</p> <p><u>STP update:</u> Further assessment of strategic risks and issues / barriers to transformation needed following the 18/19 planning process.</p> <p>To be considered further in the context of the refreshed STP plan, NHS Long Term Plan and development of an integrated care approach in SEL.</p> <p><b>MH_01 – Mental Health Workforce</b></p> <p><b>Risk level: 20</b></p> <p><u>Description:</u> Planned changes to Mental Health workforce commissioning arrangements will further reduce the future availability of a skilled Mental Health workforce resulting in unsustainable workforce costs and insufficient capacity to deliver FYFV standards as well as the demand for wider Mental Health services.</p> <p><u>STP update:</u> CCGs have provided assurance that the MHIS will be met in 2018/19. The second draft of the OHSEL Mental Health workforce plan has been submitted to HEE and a dedicated task and finish group, involving provider and commissioner stakeholders, has been established to take forward the planned initiatives for 18/19. The plan is due to be refreshed in March 2019.</p> <p><b>SP_041 – Pathology</b></p> <p><b>Risk level: 20</b></p> <p><u>Description:</u> LGT have withdrawn from the SEL Pathology procurement process.</p> <p><u>STP update:</u> The LGT Board on 25 September determined that LGT should pursue the development of an NHS network pathology service (but have requested that specialist activity is included in the tender).</p>
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<p>The Clinical Programme Board have requested for this item to remain on the risk register to monitor the risk of impact on specialist and cancer pathways – as well as current implementation of FIT bowel cancer screening – given LGT will be in a different pathology network.</p>
<p>b) BAF Issues</p>
<p><b>STP_01 - King's Financial Special Measures</b></p> <p><b>Issue level: High</b></p> <p><u>Description:</u> Trust in FSM. Uncertainty over timescale and plan to return to underlying financial balance and impact on STP financial plan.</p> <p><u>Mitigation:</u></p> <ul style="list-style-type: none"> <li>- King's to share root cause analysis with STP Exec (date: tba).</li> <li>- King's to share financial recovery plan with STP Exec (date: tba).</li> <li>- King's operational plan for 2018/19 agreed, including PSF arrangements.</li> </ul>
<p><b>STP_02 - Specialised Commissioning</b></p> <p><b>Issue level: High</b></p> <p><u>Description:</u> Specialised Commissioning 2018/19 contracts agreed – significant risk of activity over-performing contracted levels</p> <p><u>STP update:</u> King's and GSTT and NHSE have now agreed both 2017/18 positions and 2018/19 contracts. Contractual risk of over-performance sits predominantly with NHSE. This should continue to be monitored.</p>
<p><b>STP_03 – Workforce (recruitment and retention)</b></p> <p><b>Issue level: High</b></p> <p><u>Description:</u> Recruitment and retention issues have been flagged across all CLGs as a major concern.</p> <p><u>STP update:</u> Following the release of national GP retention funds, five local at scale projects are now being supported, supplemented by additional OD and leadership development funds secured through the London Leadership Academy. In addition, the STP has surveyed all GP practices about GP retention and recruitment plans and is in discussions with the LLA about coaching and mentoring support for GPs. U&amp;EC nurse development (supporting recruitment &amp; retention) bid approved and programme has commenced. A nursing supply and demand workshop has been planned for 19 September. GPN Ten Point Plan Delivery Group has been established. The STP is currently part of Phase II of the International GP Recruitment Programme. Cancer Workforce plans have been developed and resources to support implementation secured with delivery plans focused on Alliance agreed priority areas. Mental Health workforce plan has been developed and eight of the multiple bids submitted to HEE (MH transformation funds) have been supported.</p>
<p><b>STP_04 – Elective / RTT position</b></p> <p><b>Issue level: High</b></p> <p><u>Description:</u> At the OHSEL Board meeting on 19th October, an additional issue was also agreed around the deteriorating elective care position and referral to treatment (RTT).</p> <p><u>STP update:</u> Both elective care and RTT issues are managed at an individual organisational level in line with local risk/issue management processes. This typically includes the development</p>

and oversight of targeted recovery plans and trajectories for improvement. This issue should continue to be monitored at a system level by the OHSEL Board.

**Cancer\_01** - Failure to meet 62 Day Target

**Issue level: High**

Programme update: Trajectory for 62D 2018/19 resubmitted to the national team at end of March. Focus remains on implementation of the recovery plan. Significant backlogs across the three Trusts may impede meeting the 62 Day target.

STP update: The significance of this issue remains high and continues to be monitored by the alliance across all three provider Trusts, in liaison with NHS England and Improvement.

**UEC\_01** – Failure to meet 4 hour A&E / 15 minute ambulance handover targets

**Issue level: High**

Programme update: All SEL providers are not meeting the 15 minute ambulance handover / 4 hour targets according to March 2018 data. Recovery plans are in place and being managed at local AEDB level. All providers are completing ambulance handover within 15 to 30 minutes, with the exception of the PRUH which is now just exceeding this amount.

STP update: A&E performance continues to be monitored on a monthly basis at local A&E Delivery Boards and at the SEL A&E Delivery Board, with recovery plans in place at provider level. A number of measures are in place or in development (e.g. ambulance pressure smoothing protocol) to support the 15 minute handover target. The STP U&EC 2018/19 workplan is also currently in development and focuses on initiatives to support both the 4 hour A&E and 15 minute handover targets. Progress should continue to be monitored.