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| Emergency ambulances se#289 | **Development Session**  **Date of Meeting 23rd July 19** |

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| **Emergency Ambulance Services Committee Report** |
| **Proposed EASC Integrated Risk Management Framework** |

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| **Executive Lead:** | James Rodaway: Head of commissioning and programme management |
| **Author:** James Rodaway | |
| **Contact Details for further information:** [James.Rodaway@wales.nhs.uk](mailto:James.Rodaway@wales.nhs.uk) | |

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| **Purpose of the Emergency Ambulance Services Committee Report** |
| The purpose of this report is to outline for EASC the proposed process to developing an integrated risk management framework. |

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| **Governance** | |
| **Link to the Commissioning Agreement** | The Committee’s overarching role is to ensure its Commissioning Strategy for Emergency Ambulance Services utilising the five step patient pathway outlined within the National Collaborative Commissioning Quality and Delivery Agreement and the related outcomes for each care standard aligned with the Institute of Healthcare Improvement's (IHI) ‘Triple Aim’ are being progressed. This report focuses on all the above objectives, but specifically on providing strong governance and assurance. |
| **Supporting evidence** | The Collaborative Commissioning Quality and Delivery Framework for Emergency Medical Services |
| **Engagement – Who has been involved in this work?** | |
| CTMHB Corporate Governance, Chair of EASC, CASC, NCCU | |

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| **Emergency Ambulance Services Committee Resolution to:** | | | | | | |
| **APPROVE** | **√** | **ENDORSE** |  | **DISCUSS** | **√** | **NOTE** |
|  | | The Emergency Ambulance Services Committee is asked to:   * **DISCUSS & APPROVE** the proposed approach to developing an EASC Integrated Risk Management Framework. | | | | |
| **Summaries the Impact of the Emergency Ambulance Services Committee Report** | | | | | | |
| **Equality and diversity** | | There are no implications arising directly from this report. | | | | |
| **Legal implications** | | There are no implications arising directly from this report. | | | | |
| **Population Health** | | No impact | | | | |
| **Quality, Safety & Patient Experience** | | Ensuring the Committee and its Sub Groups make fully informed decisions is dependent on the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favorably on the quality, safety and experience of patients and staff. | | | | |
| **Resources** | | No direct impact | | | | |
| **Risks and Assurance** | | Identified within the report. | | | | |
| **Health & Care Standards** | | The 22 Health & Care Standards for NHS Wales are mapped into the 7 Quality Themes:  Staying Healthy; Safe Care; Effective Care; Dignified Care; Timely Care; Individual Care; Staff & Resources [http://www.wales.nhs.uk/sitesplus/documents/1 064/24729\_Health%20Standards%20Framework](http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf)  [\_2015\_E1.pdf](http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf)  The work reported in this summary and related annexes take into account many of the related quality themes in particular timely care. | | | | |
| **Workforce** | | Identified within the report. | | | | |
| **Freedom of information status** | | Open | | | | |

**Proposed EASC Integrated Risk Management Framework**

**1. SITUATION / PURPOSE OF REPORT**

The purpose of this report is to outline the proposed approach to developing and implementing an integrated risk management framework for EASC which, alongside the development of an integrated reporting approach, will help to facilitate good corporate governance.

**2. BACKGROUND / INTRODUCTION**

EASC as a commissioning body has an approved IMTP 2019-2022. The IMTP lays out in detail the existing and planned activity for EASC commissioned services and the National Programme for Unscheduled Care (NPUC).

The Chair of EASC, has had his objectives for 2019/20 agreed by the Minister for Health and Social Care. Core to these are the delivery of EASC & WAST IMTP actions and the closer alignment between the work of EASC and NPUC.

An effective approach to risk management is required to provide assurance to the committee that risks and opportunities in relation to the strategic objectives of EASC are:

1. Identified
2. Assessed
3. Planned
4. Implemented

It is important to note that this proposal around the development of an integrated risk management framework for EASC seeks to strengthen the control environment and sustain good corporate governance, implement effective internal controls and monitoring activities which support the running of EASC and the delivery of strategic commissioning plans. The interconnection of these components are outlined in the diagram in Figure 1.

Good corporate governance is about the ‘how of business. This includes oversight of the intangible factors of trust, reputation and long term viability that are vital to success. It’s about responsible business behaviours and processes, and transparency around these processes, necessary for accountability.1

**Figure 1: Integrated Risk Management supporting EASC**

‘A Director’s Guide to Integrated Reporting’ – Deloitte, 2015

**3. ASSESSMENT / GOVERNANCE AND RISK ISSUES**

Outlined below are the proposed processes and actions for the development and implementation of an integrated risk management framework for EASC. The risk management framework would manage both risks and the opportunities that may affect EASC’s strategic objectives and the work it is accountable to deliver. The approach follows 4 steps:

**Risk Management Steps**

1. Identify
2. Assess
3. Plan
4. Implement
5. **Identify**

This step has 2 components, the goals of these steps are:

1. Identify Context: obtain information about planned activity and how it fits into the wider strategy of EASC.
2. Identify Risks: aim to minimize threats and maximise opportunities.
3. **Assess**

This step has 2 components, the goals of these steps are:

1. Estimate: Prioritise risk to ascertain importance & urgency (probability, impact & proximity of risks)
2. Evaluate: understand the risk exposure.

**3. Plan**

This step involves preparing the responses to the threats and opportunities identified in the previous 2 steps.

**4. Implement**

This step will ensure that the risk management actions are implemented and monitored.

**Framework Development**

The proposed approach will utilise an EASC development session to complete the 2 components of the Identify step.

During the development session EASC will be asked to:

* Review current risks.
* Using risk management techniques; identify both external factors and internal threats and opportunities.
* Define the maximum amount of risk EASC and its subgroups are willing to bear (Risk Capacity).
* Define the amount of risk EASC is willing to accept (Risk Appetite)
* Define the threshold levels of risk which when exceeded will require escalation (Risk Tolerance)

The outputs of the development session will enable the NCCU, on behalf of the CASC, to use the outputs from the development sessions build the detail across the remaining steps of the framework for the Committee to approve.

A process flowchart for the development of the EASC Risk Management Framework is documented in Appendix 1. This approach utilises industry standard Management of Risk (M\_o\_R) methodology.

**4. RECOMMENDATION**

Members of the Emergency Ambulance Services Committeeare asked to:

* **DISCUSS & APPROVE** the proposed approach to developing a framework for risk management for EASC.

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| **Freedom of information status** | Open |

Appendix 1: EASC Integrated Risk Management Framework process flowchart

