

RISKS**1. SYSTEM RISKS**

- 1.1 Rise in demand and changes in demography were identified by all organisations. This creates risk for the affected organisation and the wider system.
- 1.2 Implementation of major initiatives such as IT innovations creates risks for the organisation and for the wider system. Both require attentive project management by the organisation and by the NHS.
- 1.3 Sharing of patient information across the health and social care system remains an issue and risk for patients receiving treatment from a number of providers
- 1.4 The lack of alignment between partner organisations is a risk to integrated working.
- 1.5 EEAST assumed a one-year mobilisation contract to provide PTS (Patient Transport Services) when the private contractor failed. There is uncertainty as to finances for the future contract and there is a risk that the CCG will procure a private provider that will deliver the service on a lower budget irrespective of clinical effectiveness or patient safety, as was the case with the previous provider.

2. EAST OF ENGLAND AMBULANCE SERVICE (EEAST)

- 2.1 Delayed ambulance handover creates a risk to EEAST meeting its response times. The inability to discharge patients from vehicles, with particular problems faced in West Herts, is a concern. [scrutiny of discharge at both ENHT and WHHT is on the scrutiny work programme]
- 2.2 EEAST faces significant pressure and risk due to staff vacancies in Hertfordshire with a 44.09% vacancy rate in Herts NE and 18.73% in Herts W. (Dec 2017 A&E Frontline Staff bands 3-6).
- 2.3 EEAST is experiencing rising demand from both demography (ageing population etc.) and non-demographic pressures such as increases in mental health and alcohol related issues etc. Funding increases do not match the rise and this is coupled with recruitment and retention pressures.

3. EAST & NORTH HERTS TRUST (ENHT)

- 3.1 The implementation of the 'Lorenzo' IT system has had a major impact on ENHT and it will continue to do so during the 12 month stabilisation period. Affected areas include: reduced staff morale, problems requesting income for the Trust, an increased waiting list and growing referrals to PALS due to communication issues with patients. However, it was noted that these problems are not uncommon for other trusts and that ENHT lacked central support.
- 3.2 Members noted that, comparatively, staff turnover at ENHT was good at 12% as opposed to a regional average of 16%. However the Trust's specific workforce problems regarding stroke consultants, phlebotomists and early career nursing staff were noted as having potential impact on patient care and outcomes.
- 3.3 There is an inherent risk to patient outcomes, especially those admitted with co-morbidities in that not all IT systems are joined up at ENHT.

4. HERTFORDSHIRE COMMUNITY TRUST (HCT)

- 4.1 The recommissioning of adult services by HVCCG is a risk if HCT is not successful in winning the contract.
- 4.2 Demographic pressures, including a rising elderly population and more people with long-term conditions, are increasing demand at a time of restricted funding and a staff vacancy rate of 11% are a potential risk to HCT.
- 4.3 Differing practices and expectations exist between HCT and partners, for instance acute discharge when HCT staff are not available. This will have an impact on patient experience and outcomes.

5. HERTFORDSHIRE PARTNERSHIP FOUNDATION TRUST (HPFT)

- 5.1 HPFT recognises the significant risk posed by increasing demand for mental health services in Hertfordshire above demographic trends (e.g. 25% for children and young people and 10% for adults). It was recognised that HPFT is well aware of the challenges posed and is taking actions to address them but the sheer size of the increased demand could create risks for all the quality account priorities.
- 5.2 The increase in demand creates additional risks for HPFT as the budget has not increased to match demand and nor has staffing.

6. PRINCESS ALEXANDRA, HARLOW (PAH)

- 6.1 Members acknowledged the great work achieved under the current leadership at PAH; however, they raised the issue of contingency arrangements should strategic leaders leave the organisation. There is a risk that a change in leadership may compromise the improvements achieved.
- 6.2 Concern was raised over capacity based on the number of beds within the PAU as there are too few beds to meet current demand. With projected future demographic changes and the increase in the population in the wider surrounding area this increases the severity of that risk.
- 6.3 Members were disturbed by the current number of vacancies within PAH and the difficulties in recruiting to certain posts (e.g. Band 5 nurses) and the impact this will have on patient outcomes.
- 6.4 The reliability of IT systems at PAH was also noted as an issue of concern.

7. WEST HERTFORDSHIRE HOSPITAL TRUST (WHHT)

- 7.1 There is a significant risk if WHHT does not receive the required funding to redevelop its estates. Without this, maintaining services and service improvement in west Hertfordshire will be adversely impacted, to the detriment of patients and residents.
- 7.2 Staffing remains a considerable risk to WHHT. It is carrying a high vacancy rate when all other organisations are seeking to recruit similarly qualified staff. Whilst there is an appreciation of the clearer pathways for nurses to progress into different roles, e.g. registrars, this appears to be a short-term solution which may result in a wider risk of staff shortages elsewhere in the organisation.