

CHASE COMMUNITY HOSPITAL REDEVELOPMENT - March 2013

Risk number	Brief description of risk	Lead Manager	Lead Director	Description of risk	Origin of risk	Action to mitigate risk	Date added	Date reviewed	Date closed	Risk subtype	Risk area
1	Lack of clarity regarding potential options for redevelopment of CCH	D Purdy	S Tiller	Stakeholder concern that beds will close at CCH with no alternative in place	Poor utilisation of CCH as a result of new models of care and changes in how care is delivered.	Task and finish groups established for Redevelopment of CCH - including outpatients, relocation of mental health and community teams, nursing homes, relocation of GP on site, new bed based model of care and EOL and MIS. Option appraisal undertaken with key stakeholders Feb 2013 to confirm preferred	01-Oct-12	01 February 2013		Organisational	SE
2	Key stakeholders, GPs and the public do not support the proposed new model of care	D Purdy	S Tiller	Lack of confidence and support	CCG	Project Board and Steering Group established with membership including key stakeholders and GPs. Robust engagement and communication plan established. Regular reports to the HOSC. HOSC working group established. Programme of communications and engagement with the local population.	01-Oct-12	01 February 2013		Organisational	SE
3	Low bed occupancy and organisational change will impact on ability to deliver safe, high quality care compliant with CQC and other NHS National Standards.	M Poulter	G Hughes	Low number of beds and occupancy levels leading to staff unable to maintain their clinical competency. Difficulties attracting skilled staff due to uncertain future of CCH and inpatient beds.	Poor utilisation of CCH as a result of new models of care, advances in treatment and changes in how care is delivered.	Shortfalls in staffing are being covered by use of agency staff and transfer of skilled staff from PCH. Provider reviewing situation on a daily basis. Regular communications with staff. Informal consultation with staff and HR commenced. Use of staff in this way can only be maintained in the short to medium term.	01-Oct-12	01 February 2013		service provision	SE
4	Beds closed earlier than planned due to loss of staff and potential risk to patient care	M Poulter	G Hughes	Beds may have to close earlier than planned due to staffing difficulties and emerging new model of care	Poor utilisation of CCH as a result of new models of care, advances in treatment and changes in how care is delivered.	Shortfalls in staffing are being covered by use of agency staff and transfer of skilled staff from PCH. Provider reviewing situation on a daily basis. Regular communications with staff. Informal consultation with staff and HR commenced. Suitable beds have been identified in the private sector.	01-Jan-13	01 February 2013		service provision	SE
5	Clinical staff training	M Poulter	G Hughes	Lack of clinical skills to support new model of care / virtual ward	SHFT	Provider to identify staff training needs. Training costs are included within the business case. A consultant geriatrician to support the development of the virtual ward model of care and provide clinical mentorship commenced in August 2012. Additional clinical skills training for nursing staff commenced in September 2012. CIISP training planned for January 2013	24.01.12	01 February 2013		service provision	SE
6	Future ownership of CCH	C Rogers	J Bawn	Impact of changes in NHS organisational change and uncertainty re. funding flows on future proposed redevelopment	NHS Re-structure and estate ownership	Ownership of CCH will transfer to NHS Property Services from 1 April 2013. The redevelopment has been identified as a legacy scheme and the capital funding identified in the business case has been included in the forecast capital programme for 13/14 and 14/15.	01/02/2013	01/02/2013		Organisational / Finance	SE

Risk site - T&F Group, Board, Steering Group	Risk grading (initial)	Current risk grading	Current likelihood	Target
Board	20	6	6	1
Board	20	9	6	1
SHFT	20	16	16	1
SHFT	16	16	16	9
SHFT	16	12	4	1
Board	16	1	1	1