

Summary of Key Mitigating Actions Agreed

	Risk/Issue	Mitigating action	Owner	Deadline for delivery
1.	Cultural issues (bullying / behavioural)	TDA to complete investigation and Acute Trust to implement actions arising. GMC and NMC to be sighted on outcome.	Kathryn Singh (TDA) Harry Turner (WAHT)	Investigation to complete by end of April 2015. Actions to be completed as per investigation recommendations.
2.	Cultural issues (bullying / behavioural)	CQC to communicate actions arising from the visit of 24th March to the Acute Trust. Acute Trust to implement actions.	Helen Richardson (CQC) Stewart Messer (WAHT) Lindsey Webb (WAHT) Penny Venables (WAHT)	Actions to be clarified by end of March. Actions to be completed as per CQC recommendations.
3.	Urgent care	Trust to implement changes for access to the assessments unit.	Stewart Messer (WAHT)	By end of April 2015.
4.	Urgent care	System to agree on single, system-wide action plan agreed to be collectively owned by all stakeholders.	Andrew Reed (NHS England) SRG members.	By end of April 2015.
5.	Urgent care	System to agree deflects policy.	Andrew Reed (NHS England) SRG members. WMAS.	By end of April 2015.
6.	Urgent care	Agree dataset for admissions, attendance figures and ambulance conveyances with SRG.	Andrew Reed (NHS England) SRG members.	By end of April 2015.
7.	Urgent care	Agree protocol for corridor patients.	Mark Docherty (WMAS) Dr Carl Ellson (South Worcestershire CCG) Stewart Messer (WAHT)	By end of April 2015.
8.	DToC and the function of the SRG	Undertake review of the functionality of the SRG and implement any changes required to improve delivery.	Andrew Reed (NHS England) – to conduct review. All SRG members to implement required actions.	By end of April 2015.
9.	DToC and the function of the SRG	System to reach agreement on definition and numbers of DToC. Stakeholders to personally sign off agreement.	Andrew Reed (NHS England) Penny Venables (WAHT) Clare Marchant (Worcestershire County Council) Sarah Dugan (Worcestershire Health and Care NHS Trust)	By end of April 2015.
10.	DToC and the function of the SRG	Develop plan for the reduction of DToC with clear actions, owners and timescales. This should build on existing two day event which identified the changes required.	Penny Venables (WAHT) Clare Marchant (Worcestershire County Council) Sarah Dugan (Worcestershire Health and Care NHS Trust) Dr Carl Ellson (South Worcestershire CCG)	By end of April 2015.
11.	DToC and the function of the SRG	Trust and County Council to work together to improve culture around interaction between Acute Trust ward staff and social care staff, to improve integrated working in planned discharge.	Stuart Messer (WAHT) Anne Clarke (Worcestershire County Council)	By the end of May 2015.
12.	Workforce	Trust to ensure there is a robust workforce plan in place to mitigate against the risk introduced by the resignation of the A&E consultants. NHS England to provide support and assistance as required.	Penny Venables (WAHT) Andrew Reed (NHS England)	By end of April 2015.

13.	Workforce	Ellen Jones (Health Education West Midlands, Chair of the Specialised Training Committee) to be invited to system-wide task group.	Karen Helliwell (NHS England)	By end of March 2015.
14.	Emergency surgery (and mortality)	CCGs and Trust to undertake a rapid joint risk assessment of emergency surgery at the Redditch site, and agree a single agreed pathway. To be shared with Trust, CCG and TDA Boards and NHS England.	Simon Hairsnape, (Wyre Forest and Redditch and Bromsgrove CCGs) Penny Venables (WAHT)	By 2 nd April 2015.
15.	Potential impact on safety	Agree county-wide commissioning vision	Andrew Reed (NHS England) to agree wording with all partners.	By end of April 2015.

Communications Plan

There will be a reactive media statement agreed.

Summing up

The Co-Chairs thanked all present for their attendance and input into the risk summit. A decision on whether to arrange a follow-up risk summit will be taken following monitoring of the actions.