

**Actions of Risk Management Executive
Tuesday 1 May 2012**

Present:	Mr A Cairns (Chair)	Chief Executive
	Mrs J Clarke	Director of Compliance & Risk Management
	Ms C Jowett	Chief Compliance Officer
	Mr A Tapp	Centre Chief, Women & Children's
	Mrs C Smith	Deputy Centre Chief / Head of Midwifery, Women & Children's
	Mrs A Hughes	CNST Midwife
	Dr S Awwad	Centre Chief, Oncology
	Dr N Srihari	Value Stream, Cancer Care
	Ms S Faulkner	Centre Manager, Oncology
	Mr E A Craig	Centre Chief, Ophthalmology
	Mr A J Prichard	Centre Chief, Head & Neck
	Dr J Jones	Centre Chief, Medicine
	Dr R Law	Centre Chief, Emergency & Critical Care
	Mrs L Gill	Governance Manager, Surgical Representing T Fox, Surgical
	Mr B McElroy	Centre Chief, Pharmacy
	Mr C Beacock	Deputy Medical Director
	Ms V Morris	Chief Nurse / Director of Quality & Safety
	Dr P O'Neill	Director of Infection Prevention Control
	Dr D Hinwood	Centre Chief, Diagnostics
	Ms C Ross	Deloitte, Internal Audit
	Ms H Hogg	Deloitte, Internal Audit
	Ms V Maher	Workforce Director
Secretary:	Mrs S Matthey	PA to Chief Compliance Officer
Apologies:	Ms D Lloyd	Centre Chief, Therapies
	Mr A Stenton	Director of Operations
	Mr N Nisbet	Finance Director
	Dr D Warner	Value Stream, Tele Health Care
	Mr P Moreau	Centre Chief, Musculoskeletal

Minute	Original Minute	Action / Recommendation	Responsibility / Deadline
2012.28	2011.46	<i>Medical Device Committee – To include IPC Representative</i>	C Jowett June 2012
2012.18	2012.13	<i>Booking & Scheduling – To produce a 3 year action plan / strategy and present to future Audit Committee / RME</i>	J Harrison June 2012
2012.28	2012.19	To action suggestions made by A Cairns in relation to middle grade medical staffing: <ul style="list-style-type: none"> • Document how and what is being undertaken to mitigate level of risk • Set out an alternative realistic pathway that can be followed • Look at medical workforce position at Month 10 and identify if risks are balanced 	A Tapp / C Smith July 2012

2012.28	2012.24	To circulate dates of remaining HealthAssure training sessions to Centres	C Jowett / S Matthey June 2012
2012.33		<p>Medical Risk Register –</p> <p>CRR306 – Cardiomemo Receiving Equipment, PRH. To amend name of risk owner from R Law</p> <p>CRR489 – Escalation Wards. To form a Working Party to bring changes into practice prior to the winter surge.</p> <p>Dermatology – To investigate the relationships with H&N, Surgery and Radiotherapy, liaise with Commissioners and discuss further at HEC</p>	<p>C Jowett June 2012</p> <p>J Jones June 2012</p> <p>J Jones June 2012</p>
2012.35		<p>Oncology Risk Register –</p> <p>CRR125 – Chemotherapy Day Centre Nurse Staffing Levels. To undertake piece of work, looking at income trends</p> <p>CRR381 – Haematology Medical Staffing. To discuss the recruitment of EU candidates with the Haematology Team</p> <p>CRR530 – Lead Cancer Nurse. To provide update at June RME regarding the recruitment panel held on 1 May</p>	<p>S Faulkner June 2012</p> <p>A Tapp / V Maher June 2012</p> <p>S Faulkner June 2012</p>
2012.36		<p>Surgical Risk Register –</p> <p>CRR505 – Limited flexi-cystoscopy capacity at SATH. To draw up a Working Party from the User Group specialties and report back to RME for solution</p> <p>CRR526 – Relocation of Pre-Op Assessment at PRH. To liaise with the Surgical Centre regarding the pre-op service being located where the current GU Clinic currently is at PRH, therefore giving notice to the PCT</p>	<p>T Fox / L Gill June 2012</p> <p>V Morris / Surgical Centre June 2012</p>
2012.37		To forward suggestions / comments to Julia Clarke for draft audit plan to enable Helen Hogg & Caroline Ross from Deloitte to take to the June Audit Committee	ALL June 2012

2012.38		To bring update to the June RME of the Level 2 NHSLA risk management standards	C Jowett June 2012
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ACTIONS NOT YET DUE

2012.22		<i>Risk Management Reports & Rule 43 Letters</i> – To prepare reports for discussion at future RME meetings	C Jowett Subsequent RME Meetings
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