

**COVID 19 RECOVERY AND REDESIGN
APPROVAL FORM v0.4**



All service proposals for Recovery or Redesign must be outlined on this SBAR Template. When complete, please send to: xxx email here (could use FSPPMO)

Ref ID (to be completed by R&R Team)

Date

NAME OF OPERATIONAL FUNCTION/SERVICE PROCESS

Existing Service Recovery Existing Redesign Programme New Redesign Proposal

SITUATION *What have you been doing recently in response to COVID-19 i.e. what was reconfigured?*

BACKGROUND *What was happening to that part of the service before reconfiguration?*

ASSESSMENT (narrative) *What needs to change soon and why? Risks are captured below*

CONSIDERATIONS

Digital opportunities

Within existing budget

Release £ efficiencies

Release productivity efficiencies

Impact on other Service(s)

Please describe the inter-dependencies

<p>RISK DESCRIPTOR</p> <p>Risk and Threat Assessment (click for dropdown option and complete all categories)</p> <p>Business</p> <p>Clinical</p> <p>Staff</p> <p>Reputation</p>	<p>RISK CALCULATION (click on the box for the level of risk using descriptors as the link below)</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th rowspan="2" style="writing-mode: vertical-rl; transform: rotate(180deg);">L I K E L I H O O D</th> <th colspan="5">IMPACT</th> </tr> <tr> <th>1</th> <th>2</th> <th>3</th> <th>4</th> <th>5</th> </tr> </thead> <tbody> <tr> <td>5</td> <td style="background-color: yellow;">5 <input type="checkbox"/></td> <td style="background-color: orange;">10 <input type="checkbox"/></td> <td style="background-color: orange;">15 <input type="checkbox"/></td> <td style="background-color: red;">20 <input type="checkbox"/></td> <td style="background-color: red;">25 <input type="checkbox"/></td> </tr> <tr> <td>4</td> <td style="background-color: lightgreen;">4 <input type="checkbox"/></td> <td style="background-color: yellow;">8 <input type="checkbox"/></td> <td style="background-color: orange;">12 <input type="checkbox"/></td> <td style="background-color: red;">16 <input type="checkbox"/></td> <td style="background-color: red;">20 <input type="checkbox"/></td> </tr> <tr> <td>3</td> <td style="background-color: lightgreen;">3 <input type="checkbox"/></td> <td style="background-color: yellow;">6 <input type="checkbox"/></td> <td style="background-color: yellow;">9 <input type="checkbox"/></td> <td style="background-color: orange;">12 <input type="checkbox"/></td> <td style="background-color: orange;">15 <input type="checkbox"/></td> </tr> <tr> <td>2</td> <td style="background-color: lightgreen;">2 <input type="checkbox"/></td> <td style="background-color: yellow;">4 <input type="checkbox"/></td> <td style="background-color: yellow;">6 <input type="checkbox"/></td> <td style="background-color: orange;">8 <input type="checkbox"/></td> <td style="background-color: orange;">10 <input type="checkbox"/></td> </tr> <tr> <td>1</td> <td style="background-color: lightgreen;">1 <input type="checkbox"/></td> <td style="background-color: lightgreen;">2 <input type="checkbox"/></td> <td style="background-color: lightgreen;">3 <input type="checkbox"/></td> <td style="background-color: yellow;">4 <input type="checkbox"/></td> <td style="background-color: yellow;">5 <input type="checkbox"/></td> </tr> </tbody> </table> <p>To complete the risk calculation use the Risk Matrix</p>	L I K E L I H O O D	IMPACT					1	2	3	4	5	5	5 <input type="checkbox"/>	10 <input type="checkbox"/>	15 <input type="checkbox"/>	20 <input type="checkbox"/>	25 <input type="checkbox"/>	4	4 <input type="checkbox"/>	8 <input type="checkbox"/>	12 <input type="checkbox"/>	16 <input type="checkbox"/>	20 <input type="checkbox"/>	3	3 <input type="checkbox"/>	6 <input type="checkbox"/>	9 <input type="checkbox"/>	12 <input type="checkbox"/>	15 <input type="checkbox"/>	2	2 <input type="checkbox"/>	4 <input type="checkbox"/>	6 <input type="checkbox"/>	8 <input type="checkbox"/>	10 <input type="checkbox"/>	1	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
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<p>RECOMMENDATIONS FOR CONSIDERATION BY R&R PROGRAMME BOARD <i>What do you recommend doing now?</i></p>																																										
<p>COMPLETED BY</p>																																										
<p>RESPONSIBLE OFFICER</p>																																										

RECORD OF DECISION

(To be completed by R&R Team Following Discussion and Determination at R&R Programme Board)

Fully Supported	<input type="checkbox"/>
Supported in Part	<input type="checkbox"/>
Not Supported	<input type="checkbox"/>
<p>Rationale:</p> <p>Supports digital opportunities <input type="checkbox"/></p> <p>Agree releases £ efficiencies <input type="checkbox"/></p> <p>Will have a positive impact on other service(s), or a plan exists to manage inter-dependencies <input type="checkbox"/></p> <p>Will have a positive impact on environmental sustainability <input type="checkbox"/></p> <p>Agree can be achieved within existing budget <input type="checkbox"/></p> <p>Agree releases productivity efficiencies <input type="checkbox"/></p>	

PROCESS OF ENACTMENT

For immediate recovery with no change	<input type="checkbox"/>
For immediate recovery with minor changes	<input type="checkbox"/>
Redesigned Service Process for immediate enactment & NHSL Board Sign Off	<input type="checkbox"/>

Redesigned Service Process for required and therefore for inclusion in revised AE Strategy & NHSL Board Sign Off	<input type="checkbox"/>
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DECISIONS DATE: