

# **Board Assurance Framework**

March 2022





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### 1. Executive summary

**Purpose:** The Board Assurance Framework (BAF) forms a part of the overall risk management and assurance process of the Trust and allows the Board to maintain oversight of the principal risks to delivery of the Trust's strategic objectives. All BAF risks are mapped to the Trust's strategic objectives and reporting is managed through the DATIX system and escalated through the relevant Trust Committee structures.

The BAF tracker report includes the Residual Risk Rating (RRR) and long-term trend for each BAF risk showing risks above Risk Appetite and within Appetite. Risks are mapped to the CQC Key Lines of Enquiry (KLOEs). Committee reports include further detail on controls and assurance for each BAF risk.

**Headlines:** Eighteen risks have a Residual Risk Rating above Risk Appetite.

New BAF Risks: None

Other updates:

**BAF 2985: Key Supplier Risk:** RRR 20 (C5XL4): This risk level is being maintained given the potential impact arising from the current action seen in the Ukraine.

**BAF 2833: Secure Environment:** This risk had seen a reduction in rating to Reduced to RRR 8 (C4xL2) but following recent service delivery issues this has been escalated back to RRR 16. This will be reflected in the April tracker report.

**BAF 730: R&D Strategic Direction and Recognition:** RRR 9 (C3xL3): Risk increased reflecting concerns that the R&D budget does not cover the time of R&D staff supporting the Trusts initiatives

**BAF 841: CIP:** RRR (C4xL3): This risk is to be closed at year end as the CIP programme has been delivered in year. This will be reflected in the tracker report in April.

Closed Risks: None



**Board Assurance Framework Policy:** The Board Assurance policy DN433 was approved by the Audit Committee in January 2022 and has had further minor amendments agreed through the Board workshop on the 3 March 2022. A copy is included in the reference pack.

**Principal Risks (PR)** The Board reviewed its principal risks on 3 March 2022 and has agreed the following restatement of it principal risks for 2022/23:

**PR1 Workforce:** Failure to maintain a committed and skilled workforce in adequate numbers to support delivery of high-quality care, through staff that are aligned to our shared values, behaviours and purpose.

**PR2 Productivity:** Failure to achieve sufficient patient throughput to support timely and equitable access to care, and achieve financial stability, through optimising the productivity of our people and facilities.

**PR3 Finances:** Failure to deliver our financial plan on a sustainable basis addressing the underlying structural deficit and our contribution to the wider system through rigorous financial management and an effective response to uncertainties in the future mechanisms for commissioning and innovation in specialised services.

**PR4 Cyber security and data loss:** Failure to ensure that our services are as resilient as possible to ever present and escalating Cyber-attacks through the application of up-to-date cyber security controls, training, surveillance and early warning of potential threats, applying systems and management practices that ensure residual risks are mitigated appropriately.

#### Recommendation

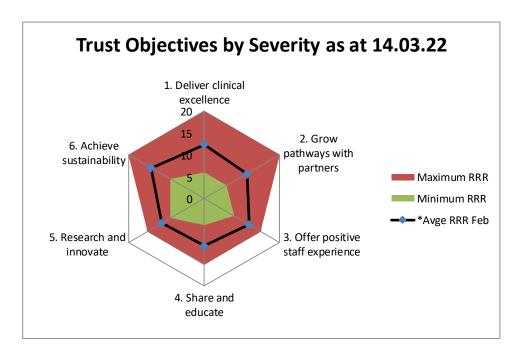
The Board is requested to note the BAF report for March 2022.

# 2. Risks Mapped to Strategic Objectives



Trust Objective 2021/22	*Avge RRR Jan	*Avge RRR Feb	Maximum RRR	Minimum RRR	change in Avge RRR
1. Deliver clinical excellence	12.9	12.4	20	6	
2. Grow pathways with partners	11.3	11.3	20	6	0
3. Offer positive staff experience	11.9	11.9	15	8	
4. Share and educate	10.8	10.8	15	6	
5. Research and innovate	10.5	11.3	15	9	
6. Achieve sustainability	14.0	14.0	20	9	

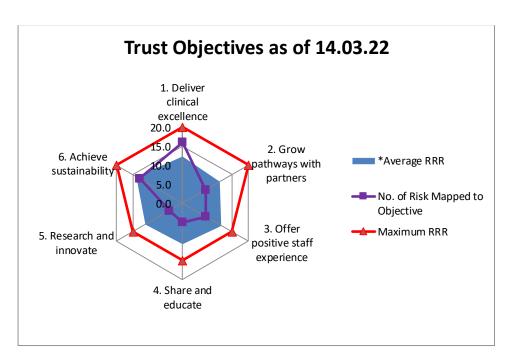
<sup>\*</sup> Average for risks included in current tracker report



#### 3. Strategic Objectives by Severity of RRR



Trust Objective 2021/22	No. of Risk Mapped to Objective	*Average RRR	Maximum RRR	Minimum RRR	Risks Opened	Risks Closed
1. Deliver clinical excellence	16	12.4	20	6		
2. Grow pathways with partners	7	11.3	20	6		
3. Offer positive staff experience	7	11.9	15	8		
4. Share and educate	5	10.8	15	6		
5. Research and innovate	4	11.3	15	9		
6. Achieve sustainability	13	14.0	20	9		



<sup>\*</sup> Average for risks included in current tracker report

# 4. BAF Tracker Risks Above Target



			NHS Foundation Trust																				
DAE	Trook	44/02/2025																			$\Box$		
		er 14/03/2022		$\square$										_	-			-		$\overline{}$	_	-	_
Produ	ced by	Anna Pearm	nan, Risk Manager	$\vdash$									_	-	-		-			$\rightarrow$	_	-	_
																	0						
ID		Opened	Title	Dec-21	Jan-22	Feb-22	Status since last month	Long running Trend	Target Risk Rating	% TRR achieved	Risk Target achieved		SO2 SO3				esponsik	Safe	Effective	Finance	eople Manag. & Cult.		Transformation
~		11/00/0011		7		7		·	<b>*</b>	7			7	¥ ¥		. 4		¥ ¥	7	_	4 -	~	Ψ.
675			Failure to protect patient from harm from hospital aquired infections	8	8	8	$\leftrightarrow$		5		×	$\stackrel{\bigstar}{\wedge}$			-	-	Q&R	$\bigstar$		$\dashv$	$\dashv$	_	_
	-		Waiting list management	16	16	16	$\leftrightarrow$	••••	8	50%	×	X		-			Performance		$\sqcup$	$\vdash$		*	
	+ +		R&D strategic direction and recognition	6	6	9	T	*******	6	67%	×		_		×	1	Q&R	4		$\vdash$			
_			Delivery of Efficiency Challenges - CIP Board approved	12	12	12	$\leftrightarrow$	*******	8	67%	×			_	-	×	Performance	4	$\Rightarrow$	$\vdash$	$\rightarrow$	_	_
858			Lorenzo Optimisation - Electroning Patient Record System - benefits	8	8	8	$\leftrightarrow$	·····	6	75%	×	*	× 7	7			SPC		Ш	$\vdash$	$\rightarrow$	ᆀ	$\bigstar$
	_		Potential for cyber breach and data loss	16	-	20	$\leftrightarrow$	********	9	45%	×	$\Rightarrow$				*	Performance	$\Rightarrow$	Ш	$\longrightarrow$		<u>'</u>	$\bigstar$
			Staff turnover in excess of our target level	15	15	15	$\leftrightarrow$	<b>&gt;</b>	9	60%	×	$\Rightarrow$	7	7		$\Rightarrow$	Performance	لبل	Ш	$\sqcup$	$\Rightarrow$	$\dashv$	
	-		Unable to recruit number of staff with the required skills/experience	12	12	12	$\leftrightarrow$	*****	8	67%	×	$\Rightarrow$	1	7		$\Rightarrow$	Performance	*		$\sqcup$	$\bigstar$		
1929	OM	23/07/2018	Low levels of Staff Engagement	12	12	12	$\leftrightarrow$	/·····	8	67%	×	$\Rightarrow$	1	7		$\Rightarrow$	Q&R			$\Box$	$\bigstar$	$\Box$	
2532	MS	05/03/2020	COVID Pandemic	10	15	15	$\leftrightarrow$	****	10	67%	×	$\Rightarrow$	1	7		$\Rightarrow$	Q&R	$\Rightarrow$	$\Rightarrow$	$\sqcup$	*	$\Rightarrow$	
2829	TG	23/02/2021	Achieving financial balance	16	16	16	$\leftrightarrow$	**************	8	50%	×					$\Rightarrow$	Performance			$\Rightarrow$	$\perp \perp$		
2901	EM	06/05/2021	Delivery of Trust 5 year strategy	9	9	9	<b></b>	**********	6	67%	×	$\Rightarrow$	* 1	* *	*	*	SPC		$\Rightarrow$	$\Rightarrow$	*	$\bigstar$	$\bigstar$
2904	TG	11/05/2021	Achieving financial balance at ICS level	20	20	20	<b>‡</b>	******	12	60%	×		$\bigstar$			$\Rightarrow$	Performance			$\Rightarrow$			
2985	TG	18/08/2021	Key Supplier Risk	20	20	20	$\leftrightarrow$	******	6	30%	×	$\Rightarrow$					Performance		*	1		$\Rightarrow$	
3008	TG	27/08/2021	Clinical Research Facility Core Grant Funding	12	12	12	<b>+</b>	******	9	75%	×	$\Rightarrow$	$\bigstar$		$\Rightarrow$	*	SPC			$\Rightarrow$			$\Rightarrow$
3009	TG	27/08/2021	Continuity of supply of consumable or services failure	10	10	10	$\leftrightarrow$	****	6	60%	×	$\Rightarrow$					Performance	*	$\Rightarrow$	*		$\Rightarrow$	
3040	MS	29/09/2021	M.Abscessus (linked to BAF risk ID675)	15	15	15	$\leftrightarrow$	•••••	10	67%	×	$\Rightarrow$		*	*	*	Q&R	*					
3074	TG	16/11/2021	NHS Reforms & ICS strategic risk	12	12	12	$\Leftrightarrow$	****	8	67%	×		$\Rightarrow$	*	-	$\Rightarrow$	Performance		$\Rightarrow$	*	-	☆	$\Rightarrow$

# 5. BAF Tracker Risks Below Target



		e <b>r 14/03/2022</b> y Anna Pearm	an, Risk Manager																			
ID	Exec	Opened	Title	◆ Dec-21	→ Jan-22	◆ Feb-22	Status since last month	Long running Trend	Target Risk Rating	등	ધ્રાકk Target achieved	SO1	\$02	\$03 \$04	\$00e	Responsible Committee	↑ Asfa	• Effective	, =	eople Manag. & Cult.	Responsive	Transformation Transformation
742	MS	30/01/2015	Failure to meet safer staffing (NICE guidance and NQB)	12	12	12	$\leftrightarrow$	•••••	12	100%	$\overline{\mathbf{V}}$	*	<b>☆</b> 7	* *	$\Rightarrow$	Q&R	1	7				
2833	TG	06/02/2021	Maintaining safe and secure environment across the organisation	16	16	8	<b>→</b>	٠/	8	100%	$\overline{\mathbf{V}}$	$\bigstar$				SPC	1	7				
2854	EM	15/03/2021	ICS engagement	6	6	6	$\leftrightarrow$	*********	6	100%	$\overline{\mathbf{V}}$	*	$\bigstar$	$\Rightarrow$		SPC						$\Rightarrow$