

# **Board Assurance Framework**

January 2024





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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 CQC domains. All BAF risks are assigned to a Board Committee and Committee reports include further detail on controls and assurance for each risk.

**Headlines:** Fifteen risks have a Residual Risk Rating above Target.

New/Closed BAF Risks: none.

Other updates:

BAF 3433: CT Reporting Backlog: RRR 16 (C4xL4): New BAF risk: If the CT reporting backlog does not improve back to the 4-week reporting KPI, then patient pathways will continue to be delayed whilst awaiting results ultimately resulting in potential patient harm. This risk has two linked risk which set out the departmental and digital factors relating to the backlog. Measures have been put in place to address this including: prioritisation of clinically indicated cases, reporting of activity to track progress reporting into the governance oversight structure (image working group), consultant recruitment and locum cover, deployment of virtual desktop infrastructure and additional workstations.

**BAF 3223:** Activity recovery and productivity: RRR 16 (C4xL4): The operational improvement plan has been incorporated into the Flow Programme delivering improvements across length of stay, discharge profile, theatre utilisation, DNAs, day case utilisation and delivery of the 2023/24 operational plan. The Flow Programme Steering Group held its first meeting in December 2023. No change in RRR.



**BAF 742 Safer Staffing:** RRR12 (C4xL3): The fill rate for day and night shifts for Registered Nurses continues to improve which is consistent with the reduced vacancy and turnover rates. Critical care capacity is adjusted to maintain safe staffing levels due to vacancies and high absence rates. No change in RRR.

**Principal Risks (PR)** The Board has agreed the following principal risks to delivery of its strategic objectives which underpin the delivery of outstanding, safe and high-quality care:

**PR1 Workforce:** Failure to maintain an engaged and skilled workforce in adequate numbers to support delivery of high-quality care and drive innovation, through staff that are well supported and 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 and deliver 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 prioritise cyber resilience through the implementation of up-to-date cyber security controls, training, surveillance, risk management, business continuity and recovery planning increases the risk of a major cyber event causing data loss, key system failure, and prolonged disruption to services.

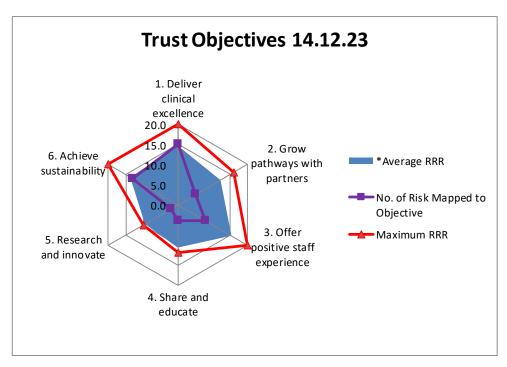
#### Recommendation

The Board is requested to note the BAF report for January 2024.

# 2. Risks Mapped to Strategic Objectives



Trust Objective 2023/24	No. of Risk Mapped to Objective	*Average RRR	Maximum RRR	Minimum RRR	Risks Opened	Risks Closed
1. Deliver clinical excellence	15	14.7	20	9	1	
2. Grow pathways with partners	5	12.2	16	9		
3. Offer positive staff experience	8	15.5	20	9	1	
4. Share and educate	4	10.8	12	9		
5. Research and innovate	2	9.5	10	9		
6. Achieve sustainability	13	13.7	20	8		



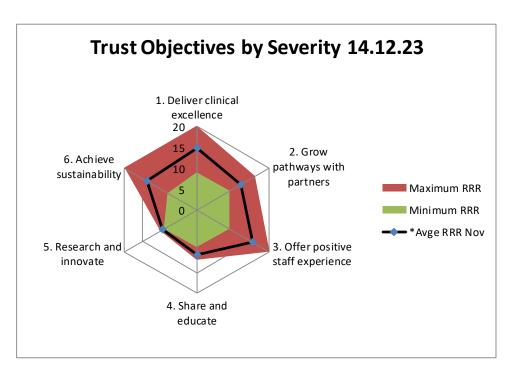
<sup>\*</sup> Average for risks included in current tracker report

### 3. Strategic Objectives by Severity of RRR



Trust Objective 2023/24	* Avge RRR Oct	*Avge RRR Nov	Maximum RRR	Minimum RRR	change in Avge RRR
1. Deliver clinical excellence	14.6	14.7	20	9	
2. Grow pathways with partners	12.2	12.2	16	9	
3. Offer positive staff experience	15.4	15.5	20	9	
4. Share and educate	10.8	10.8	12	9	
5. Research and innovate	9.5	9.5	10	9	
6. Achieve sustainability	13.7	13.7	20	8	

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



# 4. BAF Tracker Risks Above Target



ID Exec	Opened	Title		Sep-23 Oct-23		Status since last month	Long running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	Risk Target achieved	Risk Appetite	so1		SO3	\$02 \$05		Responsible Committee in addition to the Board	Care		People	Responsive	Transformation	ID
7 7			4	Ψ ,	¥ ¥	*	▼	*	*	▼			7	7	Y .	<b>*</b>	¥	7	<b>*</b>   <b>*</b>	1	4	* *	~
675 MS		Failure to protect patient from harm from hospital aquired infections	16	16 1	6 16 16	$\leftrightarrow$		6	38%	×	4	$\Rightarrow$				$\Rightarrow$	Q&R				Z	7	675
678 HM	11/06/2014	Waiting list management	20	20 2	0 20 20	$\leftrightarrow$		8	40%	×	8	$\Rightarrow$					Performance				$\bigstar$		678
858 AR (	01/02/2016	Electronic Patient Record System	16	16 1	6 16 16	$\leftrightarrow$	/	6	38%	×	6	$\Rightarrow$	$\bigstar$	★			SPC		×			$\Rightarrow$	858
1021 AR	17/02/2016	Potential for cyber breach and data loss	12	12 1:	2 12 12	$\leftrightarrow$	~ <sup>^</sup>	9	75%	×	9	$\Rightarrow$				$\bigstar$	Performance				Z	*	1021
1853 OM	27/04/2018	Staff turnover in excess of our target level	15	15 1	5 15 15	$\leftrightarrow$		9	60%	×	6	$\Rightarrow$	-	★		$\Rightarrow$	Workforce			$\Rightarrow$			1853
1854 OM	27/04/2018	Unable to recruit number of staff with the required skills/experience	16	16 1	6 16 16	$\leftrightarrow$		9	56%	×	6	☆		☆		$\bigstar$	Workforce			☆	Z	7	1854
1929 OM 2	23/07/2018	Low levels of Staff Engagement	20	20 2	0 20 20	$\leftrightarrow$		8	40%	×	6	$\Rightarrow$		$\bigstar$		$\Rightarrow$	Workforce			$\Rightarrow$			1929
2901 HM	06/05/2021	Delivery of Trust 5 year strategy	9	9	9 9	$\leftrightarrow$	***************************************	6	67%	×	6	$\Rightarrow$	$\bigstar$	* 1	7 🖈	$\star$	SPC	Z	7 X	$\bigstar$	$\bigstar$	$\Rightarrow$	2901
	18/08/2021	Key Supplier Risk	10	10 1	10 10	$\leftrightarrow$	******	6	60%	×	8	$\Rightarrow$					Performance	7	7		$\Rightarrow$		2985
3009 SH 2	27/08/2021	Continuity of supply of consumable or services failure	12	12 1:	2 12 12	$\leftrightarrow$	~ <del>~~</del> ~~~~	9	75%	×	6	$\Rightarrow$					Performance	7	7 \$		* 1	7	3009
	16/11/2021	NHS Reforms & ICS strategic risk	12	12 1:	2 12 12	$\leftrightarrow$	······	8	67%	×	8		$\bigstar$	1	7	$\Rightarrow$	Performance	7	7 \$		$\Rightarrow$	$\Rightarrow$	3074
3223 HM 2	22/07/2022	Activity recovery and productivity	16	16 1	6 16 16	$\leftrightarrow$	•••••	8	50%	×	4	$\Rightarrow$				$\Rightarrow$	Performance	7	7 2		* 7	7	3223
3261 OM	09/09/2022	Industrial Action	20	20 2	0 20 20	$\leftrightarrow$	,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12	60%	×		$\bigstar$		$\bigstar$		$\Rightarrow$	Performance	7	7	$\Rightarrow$	$\Rightarrow$		3261
3433 JS (	08/01/2024	CT Backlog		1	6 16 16	$\leftrightarrow$	•••	6	38%	×	3	$\bigstar$		$\bigstar$			Performance 7	7	7		* 7	7	3433
3449 SH 2	21/12/2023	Risk to delivery of strategic partnership working with CUH			12	<b>↑</b>	•	8	67%	×	8	$\bigstar$		☆			SPC					$\Rightarrow$	3449

# 5. BAF Tracker Risks Below Target



D	Exec	Opened	Title	Aug-23	Sep-23	2 <del>1</del> 2	Nov-23	Status since last month	Long running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	Risk Target achieved	Risk Appetite		SO2				908	Responsible Committee in addition to the Board	Care	Effective	People Manag. & Cult.	Responsive	Safe Transformation
•	٧	▼		¥ ¥	¥	٧	▼ '	7		*	▼	*	¥	¥	¥	٧	٧	7	¥	▼	*	₹.	<b>∀</b>		▼ ▼
742	MS	30/01/2015	Failure to meet safer staffing (NICE guidance and NQB)	12	2 12	12	12	8 🗸	,	8	100%	✓	4	$\Rightarrow$	$\bigstar$	≯	$\Rightarrow$		$\Rightarrow$	Q&R				T -	*
2829	SH	23/02/2021	Achieving financial balance	(	8	8	8	8 ↔		8	100%	V	8						$\Rightarrow$	Performance		7	7		
2904	SH	11/05/2021	Achieving financial balance at ICS level	12	2 12	12	12 1	2 ↔		12	100%	V	12		$\bigstar$				$\Rightarrow$	Performance		1	7		
3040	MS	29/09/2021	M.Abscessus	1(	10	10	10 1	<b>0</b> ↔		10	100%	<b>√</b>	6	$\bigstar$			$\Rightarrow$	$\Rightarrow$	$\bigstar$	Q&R					*

#### 6. Performance Committee Risks



Exec	Opened	Title	Aug-23	Sep-23	Oct-23 Nov-23	Dec-23	Status since last month	ong running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	Risk Target achieved	Risk Appetite SO1	SO2	803	504	SO5	SO6	Responsible Committee in addition to the Board	Care	Effective Finance	People Manag. & Cult.	Responsive	Transformation
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НМ	11/06/2014	Waiting list management	20	20	20 2	0 20	$\leftrightarrow$	********	8	40%	×	8 🚖					Perf	ormance				$\bigstar$	
AR	17/02/2016	Potential for cyber breach and data loss	12	12	12 1	2 12	$\leftrightarrow$	.,,	9	75%	X	9 🚖					☆ Perfe	ormance				1	*
SH	23/02/2021	Achieving financial balance	8	8	8	8 8	$\leftrightarrow$		8	100%	V	8					r Perf	ormance		A			
SH	11/05/2021	Achieving financial balance at ICS level	12	12	12 1	2 12	<b></b>		12	100%	<u> </u>	12	$\Rightarrow$				rerfe	ormance					
SH	18/08/2021	Key Supplier Risk	10	10	10 1	0 10	$\Rightarrow$	······	6	60%	X	8 🚖					Perf	ormance		$\bigstar$		$\bigstar$	
SH	27/08/2021	Continuity of supply of consumable or services failure	12	12	12 1	2 12	<b></b>	<del></del>	9	75%	×	6 🚖					Perf	ormance		* *		* 7	7
SH	16/11/2021	NHS Reforms & ICS strategic risk	12	12	12 1	2 12	<b></b>		8	67%	×	8	$\Rightarrow$		$\Rightarrow$		★ Perfe	ormance		* *		$\bigstar$	*
HM	22/07/2022	Activity recovery and productivity	16	16	16 1	6 16	<b></b>	***************************************	8	50%	×	4 🖈					☆ Perfe	ormance		$\star$		* 7	7
OM	09/09/2022	Industrial Action	20	20	20 2	0 20	$\leftrightarrow$	************	12	60%	X	6 🚖		$\bigstar$			rerfe	ormance		$\bigstar$	*	$\bigstar$	
JS	08/01/2024	CT Backlog			16 1	6 16	$\leftrightarrow$	***	6	38%	X	3 🍁		1		T	Per	formance	*	*		* 7	7
	HM AR SH SH SH SH SH HM OM	HM 11/06/2014 AR 17/02/2016 SH 23/02/2021 SH 11/05/2021 SH 27/08/2021 SH 27/08/2021 SH 16/11/2021 HM 22/07/2022 OM 09/09/2022	HM 11/06/2014 Waiting list management  AR 17/02/2016 Potential for cyber breach and data loss  SH 23/02/2021 Achieving financial balance  SH 11/05/2021 Achieving financial balance at ICS level  SH 18/08/2021 Key Supplier Risk  SH 27/08/2021 Continuity of supply of consumable or services failure  SH 16/11/2021 NHS Reforms & ICS strategic risk  HM 22/07/2022 Activity recovery and productivity  OM 09/09/2022 Industrial Action	Waiting list management   20	Waiting list management   20 20	Waiting list management   20 20 20 20 20 20 20 20 20 20 20 20 20	This is a second of the image	The state of the	Page   Page	Page   Page	Part   Part	Part   Part	Part   Part	Page   Page	### Paragraph of Potential for cyber breach and data loss   12   12   12   12   12   12   12	Power   Pow	Power   Pow	### Parity of the parity of t	### 11/06/2014 Waiting list management  ### 20 20 20 20 20 4	Part   Part	Part   Part	Part   Part	Partormance   Partormance

# 6. Quality & Risk Committee Risks



ID		Exec	Opened	Title	A110-23		Oct-23	Nov-23	Dec-23 Status since last month	Long running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	Risk Target achieved	Risk Appetite			SO3		505	806	Responsible Committee in addition to the Board	Care	Effective	Finance	People Manag. & Cult.	Responsive	Sare Transformation
•	7	¥	▼		Ψ,	7	٧	¥	¥ ,		v	v	v		v	v	¥	Ŀ	7		,	¥ ¥	7	Ψ.	٧	¥	▼ ▼
675	M	1S	111/Uh/ZU14	Failure to protect patient from harm from hospital aquired infections	1	6 16	16	16	← →		6	38%	×	4	$\bigstar$					*	Q&R					7	1
742	M	1S	30/01/2015	Failure to meet safer staffing (NICE guidance and NQB)	1	2 12	12	12	8 🗼		8	100%	<b>√</b>	4	*	*	$\Rightarrow$	1	7	$\Rightarrow$	Q&R					7	7
3040	) M	1S	29/09/2021	M.Abscessus	1	0 10	10	10	<mark>10</mark> ↔		10	100%	<b>√</b>	6	*			×	*	*	Q&R					7	7

# 6. Strategic Projects Committee Risks



ID	Exec	Dened	Title	Aug-23	Ä	Oct-23	Dec-23	Status since last month	ong running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	Risk Target achieved	Risk Appetite	503	502	504	SO5	506	Responsible Committee in addition to the Board	Care	Effective	People Manag. & Cult.	Responsive	Safe Transformation
₩.	▼.	▼.		¥ ¥	¥	¥	<b>T</b>	▼.		¥	<b>*</b>	*	₩	▼	<b>T</b>		¥	¥	7	- ▼	<b>v</b>	¥ ¥		▼ ▼
858	AR	01/02/2016	Electronic Patient Record System	16	16	16 1	6 16	$\leftrightarrow$	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6	38%	×	6 7	7	* *				SPC		7	7		$\Rightarrow$
2901	НМ	06/05/2021	Delivery of Trust 5 year strategy	Ç	9	9	9 9	$\leftrightarrow$	********	6	67%	×	6 7	7 1	*	$\Rightarrow$	$\Rightarrow$	$\Rightarrow$	SPC		* 7	<b>₹</b>	$\star$	*
3449	SH	21/12/2023	Risk to delivery of strategic partnership working with CUH				12	1	•	8	67%	X	8 7	<b>*</b>	$\Rightarrow$				SPC					*

#### 6. Workforce Committee Risks



ID	Exec	Opened	Title		Aug-23 Sep-23	Oct-23	Nov-23	Dec-23	s silice last illoll	Long running Trend (full data columns AS onwards)	Target Risk Rating	% RRR achieved	k Target achieved	Risk Appetite	501	SO2	503	804	SO5	908	sponsible Committee in addition to the Board	Care	Effective	Finance	ople Manag. & Cult. Responsive	Safe	Fransformation
v	¥	<b>▼</b>		v	v .	v v	<b>V</b>	Statu	Jan.	Long ru data o		6	Risk	+	<b>×</b>	▼.	<b>v</b>	V	¥	<b>×</b>	Respon	v	▼.		Peol	~	~
1853	ОМ	27/04/2018	Staff turnover in excess of our target level		15 1	5 15	15	15 ←	<b>→</b>		9	60%	×	6	$\star$		$\bigstar$			$\star$	Workforce				☆		
1854	ОМ	177/114/71118	Unable to recruit number of staff with the required skills/experience		16 1	6 16	16	<mark>16</mark> ←	<b>→</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9	56%	×	6	$\bigstar$		*			$\bigstar$	Workforce				*	$\bigstar$	
1929	OM	23/07/2018	Low levels of Staff Engagement		20 2	0 20	20 2	20 ←	<b>→</b>		8	40%	×	6	$\bigstar$		*			$\bigstar$	Workforce			1	*		