

Board Assurance Framework

December 2018

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Contents



1.0	Executive summary
2.0	Strategic Objectives BAF Analysis
3.0	Strategic Objectives Risk Rating
3.0	BAF Tracker Risks Above Risk Appetite
4.0	BAF Tracker Risks Above Risk Appetite

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. BAF risks have been mapped to the Trust's strategic objectives and. BAF reporting is managed through the DATIX system and risks are escalated through the relevant Trust Committee structures.

Action plans for BAF risks are reviewed on a monthly basis are captured within the Trusts' Datix reporting system. Risk target and risk appetite is reviewed at Committee level.

Executive Directors review open BAF risks on a monthly basis and the BAF

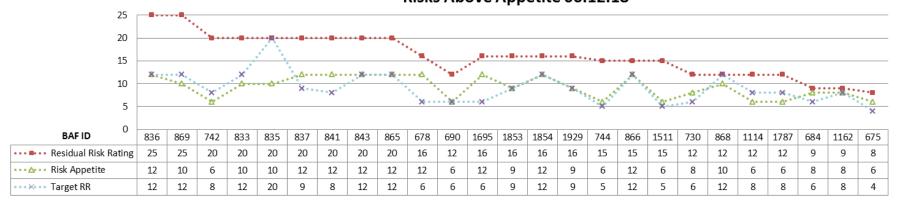
risks are brought to Trust Committees at each meeting. The BAF tracker which includes the long term trend for each BAF risk is attached at Appendix A (above Appetite) and B (within Appetite).

Headlines

Twenty five BAF risks have a Residual Risk Rating above the Risk Appetite set by the Trust. The Executive have agreed that the Cyber Security Risk will be added to the BAF. This will appear in the tracker in January 2019.

Recommendation

The Board are requested to note the BAF tracker.



Risks Above Appetite 06.12.18

NB Chart lines are not linear. The chart provides a representation of the overall 'risk universe'.

2 Risks Mapped to Strategic Objectives Analysis

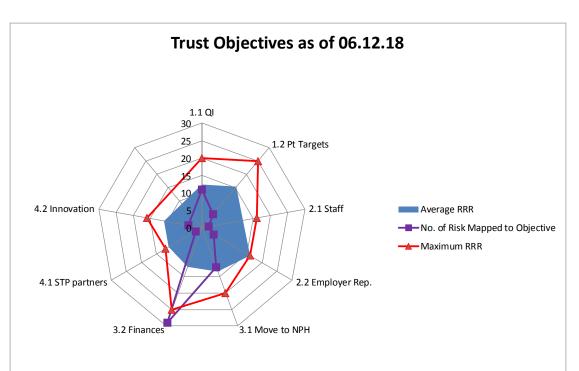


	Severity	Severity - Residual Risk Rating									
Trust Objective	No. of Risk Mapped to Objective	Average RRR	Maximum RRR	Minimum RRR	Risks Opened in Month	Risks Closed in Month					
1.1 QI	11	12	20	6							
1.2 Pt Targets	5	15	25	8		1					
2.1 Staff	2	12	16	8							
2.2 Employer Rep.	4	16	16	16							
3.1 Move to NPH	12	13	20	6							
3.2 Finances	29	12	25	6							
4.1 STP partners	2	11	12	9							
4.2 Innovation	4	11	16	8							

Trust Objectives 2018/2019 Key

- 1.1 To deliver continuous quality improvement
- 1.2 Activity plan and meet our patient access targets
- 2.1 Support and engage with our staff
- 2.2 Enhance our reputation as an employer
- 3.1 Deliver a safe and effective move
- 3.2 Deliver our financial plan
- 4.1 Work closely with our STP partners to agree a high quality plan
- 4.2 Innovate at our new hospital

Risks Opened in Month:	
Risks Closed in Month:	BAF 871



2 Strategic Objectives by severity of Residual Risk Rating



	Severity -			
Trust Objective	Average RRR	Maximum RRR	Minimum RRR	change in Avge RRR
1.1 QI	12	20	6	
1.2 Pt Targets	15	25	8	
2.1 Staff	12	16	8	
2.2 Employer Rep.	16	16	16	
3.1 Move to NPH	13	20	6	
3.2 Finances	12	25	6	
4.1 STP partners	11	12	9	
4.2 Innovation	11	16	8	

Trust Objectives by Severity as at 06.12.18

Trust Objectives 2018/2019 Key

- 1.1 To deliver continuous quality improvement
- 1.2 Activity plan and meet our patient access targets
- 2.1 Support and engage with our staff
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- 3.1 Deliver a safe and effective move
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Appendix A: BAF Tracker Risks Above Risk Appetite



- ID	 Exec 	 Opened 	Title	 ▲ Oct-18 	 Nov-18 	 Dec-18 	Status since last month 	 png running Trend 	Risk Appetite as at 17/02/2017	Risk Appetite achieved 	% Risk Assurance \$\$ int risk appetite 	BAF with Datix action	COC/PIPR	Trust Strategic Objectives 2018/2019 (Key at bottom of page)	Responsible Committee in
675	JR	11/06/2014	Failure to stay within ceiling trajectories for all HCAI's	8	8	8	\leftrightarrow	······	6	×	75%	Y	Safe	1.1, 1.2, 2.1, 3.1, 3.2, 4.2,	Q&R
678	EM	11/06/2014	Failure to meet cardiac and cancer waiting targets	16	16	16	\leftrightarrow	•••••	12	×	75%	Y	Finance	1.2	Performance
684	JS	11/06/2014	Failure to release staff to undertake educational activity due to workload	9	9	9	\leftrightarrow	•••••	8	×	89%	Y	People Manag. & Cult.	2.1	Q&R
690	RC	11/06/2014	Ageing Estate	20	16	12	\downarrow		6	×	50%	Y	Safe	1.1, 3.1, 3.2	Q&R
730	RH	01/04/2015	R&D strategic recognition	12	12	12	\leftrightarrow		8	×	67%	Y	Responsive	4.1	Q&R
742	JR	30/01/2015	Safer staffing and Monitor's Agency Price cap	20	20	20	\leftrightarrow	······	6	×	30%	Y	Safe	1.1	Q&R
744	JR	15/01/2015	CQC Fundamentals of care	6	15	15	\leftrightarrow	<i>r</i>	6	×	40%	Y	Safe	1.1, 3.1	Q&R
833	RC	01/02/2016	Current Trading Income performance	20	20	20	\leftrightarrow	······	10	×	50%	Y	Finance	3.2	Performance
835	RC	01/02/2016	Current Trading Expenditure	20	20	20	\leftrightarrow	······································	10	×	50%	Y	Finance	3.2	Performance
836	EM	- 1 - 1	Income Growth - targets	25	25	25	\leftrightarrow		12	×	48%	Y	Finance	3.2	Performance
837	EM	01/02/2016	Income Growth - case mix	20	20	20	\leftrightarrow	۰ <i></i>	12	×	60%	Y (F)	Finance	3.2	Performance
841	EM	01/02/2016	Delivery of Efficiency Challenges - SIP Board approved	20	20	20	\leftrightarrow		12	×	60%	Y	Effective	3.2	Performance
843	EM	01/02/2016	Delivery of Efficiency Challenges - SIP targets	20	20	20	\leftrightarrow		12	×	60%	Y (F)	Effective	3.2	Performance
865	EM	01/02/2016	Income Growth - activity transfers	20	20	20	\leftrightarrow		12	×	60%	Y (F)	Finance	3.1	Performance
866	RC	01/02/2016	Expenditure Growth - New ways of working	15	15	15	\leftrightarrow	····	12	×	80%	Y	Transformation	3.1, 3.2	Performance
868	EM	01/02/2016	Capacity assumptions - length of stay	12	12	12	\leftrightarrow		10	×	83%	Y (F)	Responsive	1.2	Performance
869	EM	01/02/2016	Capacity assumptions - activity	20	25	25	\leftrightarrow		10	×	40%	Y (F)	Responsive	1.2	Performance
1114	EM	17/02/2016	Utilisation of capacity to add financial gains to the overall CIP	12	12	12	\leftrightarrow		6	×	50%	Y	Responsive	3.2	Performance
1162	EM	07/07/2016	The STP work includes Cardiology	9	9	9	\leftrightarrow	•••••	8	×	89%	Y	Transformation	4.1	Project Management
1511	JR		Inability to retain or recruit staff affecting quality care and capacity	15	15	15	\leftrightarrow		6	×	40%	Y	People Manag. & Cult.	1.1, 3.1, 3.2	Q&R
1695	JS		Insufficient workforce to meet the staffing requirements of new hospital	16	16	16	\leftrightarrow	*********	12	×	75%	Y	Safe	1.1, 1.2, 3.1, 4.2	Strategic Projects
1787	JR	22/12/2017	Optimisation of the EPR systems	12	12	12	\leftrightarrow		6	×	50%	Y	Safe	1.1	Q&R
1853	ОМ	27/04/2018	Turnover in excess of target and will increase as a result of the move	16	16	16	\leftrightarrow		9	×	56%	Y	Safe	2.2	Performance
1854	ОМ	27/04/2018	Unable to recruit number of staff with required skills/experience.	16	16	16	\leftrightarrow	••••••	12	×	75%	Y	Safe	2.2	Performance
1929	ОМ	23/07/2018	Low levels of Staff Engagement	16	16	16	\leftrightarrow	•••••	9	×	56%	Y (HR)	People Manag. & Cult.	2.1, 2.2	Q&R

Appendix A: BAF Tracker Risks Below Risk Appetite



Note: Data taken from Datix will reflect the score given to the risk as close as possible to 1st of the month. i.e. Some risks were updated mid-month and thus other Trust reports may have captured a different score														
Exec	▲ Opened	Title	 Oct-18 	 Nov-18 	Dec-18	Status since last month 	 Jng running Trend 	Risk Appetite as at 17/02/2017	Risk Appetite	% Risk Assurance	BAF with Datix action	сос/ріря	Trust Strategic Objectives 2018/2019 (Key at bottom of page)	Responsible Committee in
689 AR	11/06/2014	Pathology IM&T systems	16	12	12	\leftrightarrow	······································	12		100%	Y	Transformation	4.2	Strategic Projects
731 RH	01/04/2014	Research Good Clinical Practice and Research Governance	6	6	6	\leftrightarrow		8		133%	Y	Responsive	1.1	Q&R
746 RC	01/01/2015	Future financial performance	6	6	6	↔		12		200%	Y	Finance	3.2	Performance
838 JR	01/02/2016	Income Growth - CQUIN rates	9	9	9	↔		12		133%	Y	Finance	3.2	Performance
839 RC	01/02/2016	Efficiency Assumptions - inflation rates	8	8	8	\leftrightarrow	····	12		150%	Y	Finance	3.2	Performance
840 RC	01/02/2016	Efficiency Assumptions - tarrif changes	8	8	8	\leftrightarrow	······	12		150%	Y	Finance	3.2	Performance
847 RC	01/02/2016	Variations on the New Hospital	10	10	10	\leftrightarrow	·······	10		100%	Y	Transformation	3.1, 3.2	Performance
849 RC	01/02/2016	Whole Hospital Equipping Plan - Ioan draw down	6	6	6	\leftrightarrow	·//``	12		200%	Y	Transformation	3.2	Performance
850 RC	01/02/2016	Whole Hospital Equipping Plan purchases vs loan value	12	12	12	\leftrightarrow		12		100%	Y	Transformation	3.1, 3.2	Performance
852 RC	01/02/2016	Operational Transition - Transitional Relief	6	6	6	\leftrightarrow		9		150%	Y	Finance	3.1, 3.2	Performance
858 JR	01/02/2016	Electronic Patient Record System - benefits (Linked to ID1787)	8	8	8	\leftrightarrow		12		150%	Y	Transformation	1.1, 4.2, 3.2	Strategic Projects
872 RC	01/02/2016	Efficiency assumptions - government policy changes	12	12	6	+	v	12		200%	Y	People Manag. & Cult.	3.2	Performance
873 RC	01/02/2016	Master Development and control plans - sale value	10	10	10	\leftrightarrow	·····/···/	10		100%	Y	Finance	3.2	Performance
874 RC	01/02/2016	Master Development and control plans - sales dates	10	10	10	\leftrightarrow	·····	10		100%	Y	Finance	3.2	Performance
875 RC	01/02/2016	Master Development and control plans - local planning regulations	10	10	10	\leftrightarrow	···/······\	10		100%	Y	Transformation	3.2	Performance
877 RC	01/02/2016	Unitary Payment - RPI increases	9	9	9	\leftrightarrow	•••	9		100%	Y	Finance	3.2	Performance
882 RC	01/02/2016	Whole hospital equipping plan - deficit position	12	12	12	\leftrightarrow	<i>/</i>	12		100%	Y	Finance	1.1, 3.1, 3.2	Performance
884 RC	01/02/2016	Operational Transition - Transitional Relief	9	9	6	\downarrow		9		150%	Y	Finance	3.2	Performance
1030 MJ	17/02/2016	Microsoft Software Licenses Non-compliance	12	12	12	\leftrightarrow	••••••	12		100%	Y	Finance	1.1, 3.2	Strategic Projects
1427 RC	10/02/2017	Failure to deliver the operational financial plan	12	10	10	\leftrightarrow		12		120%	Y	Finance	3.2	Performance