

Meeting Title	Board of Directors - Open		
Date	10 November 2022	Agenda item	Bo.11.22.29

Board Assurance Framework & High Level Operational Risks

Presented by	Laura Parsons, Associate Director of Corporate Governance/Board Secretary		
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Lead Director	Mel Pickup, Chief Executive		
Purpose of the paper	This paper provides a profile of risks, controls and assurances related to the delivery of the Trust's strategic objectives		
Key control	Understanding the Board's risk appetite related to the achievement of the Trust's strategic objectives is a key component of the Board Assurance Framework		
Action required	For decision		
Previously discussed at/informed by	Board Assurance Framework: ETM – 17 October 2022, Academies – 26 October 2022 High Level Risk Register and movement log: ETM – 26 September & 17 October 2022, Academies – 28 September & 26 October 2022		
Previously approved at:	Committee/Group	Date	
	N/A		

Key Options, Issues and Risks

In line with the Risk Management Strategy, the Board's role in relation to the Board Assurance Framework (BAF) and High Level Risks is as follows:

- Seek assurance from the Executive Team and Academies that all risks on the High Level Risk Register and BAF are appropriately recognised and recorded, and that all appropriate actions are being taken within appropriate timescales where risks are not appropriately controlled.
(NB Where risks relating to a particular strategic objective are not aligned to an Academy, the Board will seek assurance directly from the Executive Team.)

BAF – Strategic Risk

The Board has overall responsibility for ensuring systems and controls are in place, sufficient to mitigate any significant risks which may threaten the achievement of the organisation's strategic objectives.

The BAF collates information about risk appetite, relevant risks, and assurance, for each of the Trust's five Strategic Objectives. This supports Board members in considering the papers and topics discussed at Board meetings, and informing an overall view about the level of assurance provided.

BAF – Quarter 2

The BAF as at the end of quarter 2 is attached at Appendix 1 for review. It was reviewed and updated by the lead executives, and was reviewed and agreed by the Executive Team on 17 October 2022.

The Academies reviewed the BAF risks within their remit on 26 October 2022.

The People and Quality & Patient Safety Academies agreed that the risks were appropriately recognised and that appropriate actions were being taken to mitigate the risks. The Finance & Performance Academy agreed that appropriate mitigations were in place, but it was noted that risk 2a.2 would be reviewed to ensure that it reflects the longer term financial outlook, and not just the in-year position.

The Quality & Patient Safety Academy noted that the potential impact of industrial action would be reflected within the staffing risk, and this risk is already included on the operational risk register (current score 12). The Quality & Patient Safety Academy also had a detailed conversation in relation to the reporting of research and

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how to measure its impact, however there were no changes required to the BAF in relation to this.

The matters that should be noted by the Board are outlined on the summary page of the BAF (page 1). The details behind each risk including the relevant controls, assurances, gaps and actions to address gaps are then set out on individual pages.

High Level Risk Register and Movement Log – Operational Risk

All **operational** risks scoring 15 and above (high level risks) are escalated to the Executive Team Meeting (ETM) on a monthly basis and then to the relevant Academies and the Board.

At its meetings on 26 September and 17 October 2022, ETM considered a summary of all high level risks, aligned to their respective Academies and a movement log showing additions, closures and changes in score, and those risks which had passed their review date.

The Academy reviewed the high level risks within their remit at their meetings on 28 September and 26 October 2022 and details of the discussions are included in the Academy Chair reports.

The October ETM summary is below. There were no exceptional items requiring escalation to the Board:

Ongoing risks

ETM noted that there were two risks which were past the target date for implementation of the mitigating actions (both aligned to the Quality & Patient Safety Academy):

- 3309 - There is a risk of harm to patients and the organisation from delays in processing histopathology samples – target date 30/09/2020. The target date has now been reviewed and updated to 31/12/2022.
- 3591 - There is a risk to the Trust as we are non-compliant with ventilation requirements – target date 31/12/2020. Since the risk report was produced and considered by ETM, it has been proposed to close this risk as it is reflected within the wider backlog maintenance and critical infrastructure risk (3627). The proposed closure will be considered by ETM as part of the next risk cycle in November.

NB It was noted at the Quality & Patient Safety Academy meeting that risk 3411 (consultant vacancies within Oncology) was also beyond its target date for mitigation. The Academy was advised that this risk was in the process of being refreshed to reflect the current circumstances.

The Quality & Patient Safety Facilitators are aligned to the new CSU structure and will work with the CSUs to ensure that risks are refreshed and rearticulated where required.

New risks to the High Level Risk Register (HLRR)

There was one new risk accepted onto the HLRR, relating to limited access to the Gastro Olympus ERCP Stack systems which are both being used outside of service agreement and are unreliable. This risk is aligned to the Finance & Performance Academy. ETM noted that this risk is expected to be mitigated by the end of October as the replacement stacks have been ordered and are expected to be delivered by 31 October 2022.

Risks which have changed in score

One risk (3686) had reduced in score, from 15 to 9. This relates to the risk that the antenatal clinic (ANC) waiting area is not fit for its current and future purpose. The score had reduced as the pods have been removed from the waiting area which has enabled more seating space and improved visibility of women. Plans are in place to move the gynaecology outpatient clinic by the end of the financial year which will improve waiting area capacity.

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ETM agreed that the reduction in score was appropriate.

Risks which have been removed/closed

No risks had been removed or closed.

Risks beyond their review date

There were two risks beyond their review date which have since been reviewed and updated.

NB There are two risks which currently have review dates stated as January 2022 (3627 and 3800). This is due to a data entry error on Datix; the review dates should be January 2023 rather than 2022.

The complete high level risk register (as at 19 October 2022) of all risks scoring 15 and above is attached at Appendix 2, and the movement log is at Appendix 3.

Recommendation

The Board is asked to confirm whether it is assured that all risks on the High Level Risk Register and BAF are appropriately recognised and recorded, and that all appropriate actions are being taken within appropriate timescales where risks are not appropriately controlled.

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Risk assessment						
Strategic Objective	Appetite (G)					
	Avoid	Minimal	Cautious	Open	Seek	Mature
To provide outstanding care for patients, delivered with kindness				g		
To deliver our financial plan and key performance targets		Finance	g	Performance		
To be one of the best NHS employers, prioritising the health and wellbeing of our people and embracing equality, diversity and inclusion					g	
To be a continually learning organisation and recognised as leaders in research, education and innovation				g		
To collaborate effectively with local and regional partners, to reduce health inequalities and achieve shared goals					g	
The level of risk against each objective should be indicated. Where more than one option is available the level of risk of each option against each element should be indicated by numbering each option and showing numbers in the boxes.	Low		Moderate	High	Significant	
	Risk (*)					
Explanation of variance from Board of Directors Agreed General risk appetite (G)						

Risk Implications	Yes	No
Risk register and/or Board Assurance Framework Amendments		▪
Quality implications		▪
Resource implications		▪
Legal/regulatory implications		▪
Diversity and Inclusion implications		▪

Regulation, Legislation and Compliance relevance
NHS Improvement: Risk assessment framework, quality governance framework, code of governance
Care Quality Commission Domain: well led
Care Quality Commission Fundamental Standard: good governance
Other (please state):

Relevance to other Board of Director's Committee:	
Audit Committee	Other (please state)
▪	Academies