

Meeting Title	Board of Directors - Open		
Date	19 January 2023	Agenda item	Bo.1.23.20

Board Assurance Framework & High Level Operational Risks

Presented by	John Holden, Director of Strategy and Integration/Deputy Chief Executive		
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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 – 19 December 2022, Academies – 23 December 2022 (via e-mail) High Level Risk Register and movement log: ETM – 21 November & 12 December 2022, Academies – 30 November (all Academies) & 14 December 2022 (Quality & Patient Safety Academy only)		
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 3

The BAF as at the end of quarter 3 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 19 December 2022.

The Academies received the BAF risks within their remit for review via e-mail on 23 December 2022.

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.

In particular the Board is asked to consider the proposal to close risk 1.2 (*If we don't have the right staff in the right place with the right knowledge, skills and expertise, then we won't be able to deliver effective services, resulting in unsafe care, poor patient experience and outcomes*), due to overlaps/duplication with risk 3.1 (*If*

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we are unable to recruit to our vacancies, then our current staff will be placed under additional pressure and we may be unable to provide safe staffing levels, resulting in an adverse impact on patient safety and experience, staff experience and wellbeing, and an increase in staff turnover).

It was proposed that risk 3.1 would remain open and be aligned to strategic objective 1 (outstanding care) as well as strategic objective 3 (to be one of the best NHS employers), as the risk could impact our achievement of both objectives. It would be reported to both the Quality & Patient Safety and People Academies.

Members of both the Quality & Patient Safety and People Academies have been asked to consider this proposal (via e-mail). One of the Co-Chairs of the Quality & Patient Safety Academy has raised a query as to whether the risks do actually overlap, as risk 1.2 goes beyond recruitment to vacancies. The need for an effective training needs analysis and to ensure that staff are skilled in new and innovative ways of working was also highlighted.

Risk 4.1 (*If it is not possible to fill rota gaps or provide experienced trainers, then we may fail to provide an appropriate learning experience for trainees, resulting in an adverse impact on our reputation and potential withdrawal of the Trust's training accreditation status*) reflects the risk relating to staff training, therefore it is proposed that risk 1.2 is closed, however the Board may wish to provide the Quality & Patient Safety Academy with an opportunity to discuss this further as part of the next BAF reporting cycle (in February 2023).

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 21 November and 12 December 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 30 November (all Academies) and 14 December (Quality & Patient Safety Academy only, as the other Academies did not meet in December). Details of the discussions are included in the Academy Chair reports.

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

Ongoing risks

ETM noted there were two risks which had passed the target date for completion of the mitigating actions:

- 3810 – Haematology consultant vacancies – target date 08/12/2022.
- 3696 – Pharmacy aseptic unit – target date 30/11/2022. The target date has since been reviewed and updated to 31 March 2023.

New risks to the High Level Risk Register (HLRR)

ETM considered one new proposed risk which was scored at 15 or above:

- 3816: Due to the sheer workload being delivered by the consultant medical staff within Obs+Gynae, there is a significant burden of sessions being delivered on top of job planned activity.

ETM agreed that this risk should be considered further, including whether the score is appropriate relative to other services and in light of the staffing pressures across the organisation.

Risks which have changed in score

No risks had changed in score.

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Risks which have been removed/closed

One risk had been closed since the last report:

- 3801: Limited access to the Gastro Olympus ERCP Stack systems which are both being used outside of service agreement and are unreliable.

This risk has been closed as the replacement stack systems have been received.

ETM agreed that the risk closure was appropriate.

Risks beyond their review date

One risk was beyond its review date – 3404 - Maternity staffing issues due to long and short term sickness. The risk has since been reviewed and updated.

The complete high level risk register (as at 8 December 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; and
- note the proposal to close risk 1.2 and, noting the feedback received, agree whether the risk can be closed or whether to ask the Quality & Patient Safety Academy to discuss further as part of the next BAF reporting cycle.

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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			g			
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