

Meeting Title	Board of Directors		
Date	21 September 2023	Agenda item	Bo.9.23.19

Board Assurance Framework & High Level Operational Risks

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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 assurance		
Previously discussed at/informed by	Board Assurance Framework: ETM – 21 August 2023, Quality and Patient Safety Academy 23 August, People Academy – via email during August 2023, Finance and Performance Academy – via email during August 2023. High Level Risk Register and movement log: ETM – 17 July 2023 & 21 August 2023 (and 'deep dive' review on 7 August 2023), Academies – Quality and Patient Safety Academy 26 July 2023 & 23 August 2023, People Academy – 26 July 2023, Finance and Performance Academy – 26 July 2023.		
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 informs an overall view about the level of assurance provided.

The BAF 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 21 August 2023. The Quality and Patient Safety Academy reviewed the BAF risks within their remit at their meeting on 23 August 2023. The Finance and Performance Academy and People Academy reviewed the BAF risks within their remit via email in August 2023.

The key points to note are included 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. There have been no changes to the risk scores since the previous update.

High Level Risk Register (HLRR) – Operational Risk

All **operational** risks scoring 15 and above (high level risks) are escalated to the Executive Team Meeting

Meeting Title	Board of Directors		
Date	21 September 2023	Agenda item	Bo.9.23.19

(ETM) on a monthly basis and then to the relevant Academies and the Board.

At its meetings on 17 July and 21 August 2023, ETM considered a summary of all high level risks, including any new risks, closures and changes in score, and those risks which had passed their review date.

The Academies reviewed the high level risks within their remit at their meetings as follows:

- Quality and Patient Safety Academy - 26 July 2023 & 23 August
- People Academy – 26 July 2023
- Finance and Performance Academy – 26 July 2023

The HLRR, showing all high level risks rated 15+, is attached at Appendix 2.

High Level Risks Report on a Page

The document at Appendix 3 provides a visual overview of all high level risks at BTHFT and shows trends over a number of cycles and flags areas that ETM, the Academies and Board may wish to consider. This is aligned with a similar document that is presented at Place/ICB meetings. The following information is included:

- An overview of the risk profile, with details of the total number of high level risks.
- An overview of whether scores are increasing, decreasing or staying static.
- A graph showing the changing number of risks on the register.
- Static risks which demonstrates over time how long risks have remained static for. A risk that remains static over a number of months may be an indication that further work is required to control the risk.

Target Mitigation Dates

Risks beyond their target mitigation date

ETM noted that 1 risk had passed the target date for completion of the mitigating actions:

Risk ID:	Current Score:	Risk Description:	Lead Director:	Target date for completion of mitigating actions:
3800	20	Increase in the cost of gas and power at Bradford Royal Infirmary and St Luke's Hospital from the 1st April 2024 when the Trust's current price agreement expires	Sajid Azeb, Chief Operating Officer	01/08/2023

The target mitigation date relating to risk 3800 will be reviewed and updated as soon as possible.

Changes to target mitigation dates

The document at Appendix 4 provides a detailed overview of all current high level risks and the number of changes made to the target mitigation date for each risk since it was created.

New risks to the High Level Risk Register (HLRR)

ETM agreed to accept two new risks to the HLRR:

Risk ID:	Score:	Risk Description:	Lead Director:	Academy:
3881	16	If we are unable to recruit to a number of unfilled pharmacy vacancies and provide cover to deliver a 7	Sajid Azeb, Chief	People Academy

Meeting Title	Board of Directors		
Date	21 September 2023	Agenda item	Bo.9.23.19

		day service then the Trust will not improve and sustain medicines reconciliation rates to above national average resulting in a regulatory risk to the Trust's aspiration to become an 'Outstanding' provider and an increased risk of harm to patients if unresolved.	Operating Officer	Quality and Patient Safety Academy
3885	15	There is a risk to patients, staff and visitors and the organisation due to lack of operational security supervision, management and resilience.	Sajid Azeb, Chief Operating Officer	People Academy

In relation to risk 3885, it was agreed that the risk description would be reviewed to clarify that the risk relates to a lack of 24/7 supervision of the operational security team.

Risks which have been removed/closed

There are no risks that have been closed since the last report.

Risks which have changed in score

No risks changed in score since the last report.

Risks beyond their review date

ETM noted there were 3 risks that were beyond their review date:

Risk ID:	Score:	Risk Description:	Lead Director:	Review Date:
3468	15	Recording of activity and patient pathway steps on EPR	Sajid Azeb, Chief Operating Officer	31/07/2023
3696	16	Deteriorating Condition of the Pharmacy Aseptic Unit Facility and Equipment	Sajid Azeb, Chief Operating Officer	31/07/2023
3711	16	Paediatric Inherited Metabolic Disorder Y&H Dietetic Service Capacity	Karen Dawber, Chief Nurse	31/07/2023

Risks 3468 and 3696 have been updated since ETM took place on 21 August 2023 and have therefore been removed as 'past the review date' on the High Level Risks on a Page at Appendix 2. 3711 will be updated as soon as possible.

Ongoing risks

In June, the Executive Team noted that there were a number of risks which had been on the risk register for a long period of time, and therefore agreed to undertake a detailed review of those risks. This 'deep dive' review took place on 7 August, which confirmed that the risks were still relevant and should therefore continue to be included on the High Level Risk Register.

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.

Meeting Title	Board of Directors		
Date	21 September 2023	Agenda item	Bo.9.23.19

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: <i>Risk assessment framework, quality governance framework, code of governance</i>
Care Quality Commission Domain: <i>well led</i>
Care Quality Commission Fundamental Standard: <i>good governance</i>
Other (please state):

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