





Board Assurance Framework (BAF)			
Meeting	Board of Directors		
Date	10/06/2020	Agenda item	9
Lead Director	Alison Hughes, Director of Corporate Affairs		
Author(s)	Karen Lees Head of Corporate Governance		
Action required (please tick the appropriate box)			
To Approve	<input type="checkbox"/>	To Discuss	<input type="checkbox"/>
		To Assure	<input checked="" type="checkbox"/>
Purpose			
The purpose of this paper is to provide the Board of Directors with an update regarding the Board Assurance Framework for assurance and discussion.			
Executive Summary			
The BAF records the principal risks that could impact on the Trust achieving its strategic objectives and provides a framework for reporting key information to the Board of Directors.			
During 2019-20 the Board of Directors managed 12 principal risks (strategic risks) themed according to three strategic areas - Our Population, Our People and Our Performance.			
The annual assurance framework review for 2019-20 completed by Mersey Internal Audit Agency (MIAA) and reported to the Audit Committee, concluded that “the organisation’s Assurance Framework is structured to meet the NHS requirements, is visibly used by the Board and clearly reflects the risks discussed by the Board” .			
In March 2020, the Board considered the Board Assurance Framework for the new financial year including a new outcome focused structure. This work continues with further detail included in the supporting paper.			
Risks and opportunities:			
Quality/inclusion considerations:			
Quality Impact Assessment completed and attached <input type="checkbox"/> No			
Equality Impact Assessment completed and attached <input type="checkbox"/> No			
The quality impact assessments and equality impact assessments are undertaken on the work streams that underpin the BAF			
Financial/resource implications:			
The financial and resources implications are detailed in the BAF for each risk			
Trust Strategic Objectives			
<i>Please select the top three Trust Strategic Objectives that this report relates to, from the drop down boxes below.</i>			
<input type="checkbox"/> Our Populations - outstanding, safe care every time	<input type="checkbox"/> Our People - enhancing staff development	<input type="checkbox"/> Our Performance - increase efficiency of all services	
Board of Directors is asked to consider the following action			
The Board of Directors is asked to note the position reported and the next steps in reviewing and finalising principal risks.			

Report history		
Submitted to	Date	Brief summary of outcome
The Board Assurance Framework is reported to every meeting of the Board of Directors for discussion and assurance.	05/02/2020	The Board of Directors received the update and approved the reduced risk rating for ID01, ID09 and ID10 and noted that ID11 remained a high-level risk.
Board of Directors	06/05/2020	A verbal update on the management of risk during the Trust's response to COVID-19 was provided.

Board Assurance Framework (BAF)

Board Assurance Framework 2019-20 year-end position

1. During 2019-20 the Board Assurance Framework was reviewed at every meeting of the Board of Directors.
2. There were 12 principal risks managed through the year relating to the following themes;
 - On-going compliance with statutory, regulatory and professional standards
 - The impact of the outcome of the CCG Urgent Care Review that could negatively impact on the Trust's financial position
 - Failure to engage and support staff to deliver the trust's vision and strategy
 - Failure to recruit and retain the appropriate mix of staff to ensure safe delivery of services
 - The configuration of PCNs disrupting or restricting quality of services
 - Failure to establish, foster and manage the right partnerships to respond to the NHS Long Term Plan
 - Failure to keep pace in digital advancement and innovation
3. Of the 12 principal risks, four were categorised as risk averse; these related to regulatory and financial compliance, patient/service user safety and digital innovations.
4. The highest scoring risk (RR20) related to the impact of the outcome of the Urgent Care Review (ID11). Whilst an 'open' risk appetite had been agreed and the controls, mitigations and actions were reviewed throughout the year, the Board of Directors agreed that it remained a high-level risk.
5. In-year a number of risks were reviewed allowing some risk ratings to reduce. These included.

ID	Principal risk	Risk Appetite	Initial risk rating	Final risk rating	Target risk rating
ID01	Non-compliance of our services with statutory, regulatory and professional standards	Averse	RR12 (4x3)	RR8 (4x2) 	RR4 (4x1)
ID05	Failure to engage and support staff to deliver the Trust's vision and strategy for outstanding services	Cautious	RR12 (4x3)	RR8 (4x2) 	RR4 (4x1)
ID09	Failure to deliver the efficiency programme resulting in a reduction in service delivery and options for people	Open	RR8 (4x2)	RR4 (4x1) 	RR4 (4x1)
ID10	Failure to achieve all the relevant financial statutory duties	Averse	RR8 (4x2)	RR4 (4x1) 	RR4 (4x1)

6. The summary matrix attached highlights the movement of principal risks during 2019-20.

Board Assurance Framework Review 2020-21

7. In March 2020 the Board of Directors met in informal session to consider the BAF for 2020-21. This included a review of principal risks from the previous year, the Trust's organisational strategy, consideration of system risks, intelligence from sub-committees of the board and board member feedback from service visits, staff engagement events and system meetings.
8. The following risk themes were identified, against the strategic themes of Our Population, Our People and Our Performance.
 - Non-compliance with statutory, regulatory and professional standards
 - Conflicting pressures between alignment with meeting national and local GP priorities within PCNs
 - Developments at LCR and ICS level that could impact on delivery and appropriate alignment within the system
 - Staff engagement, staff skills, workforce infrastructure and career pathways
 - Wellbeing and culture
 - Fostering and managing the right partnerships to respond to the NHS Long Term Plan
 - Cyber defences, protecting data and information governance
9. The structure of the BAF was also reviewed with a proposal to develop a more outcome focused structure providing more clarity on the outcomes to be achieved to support a reduction in risk rating.
10. The table below provides an overview of the structure to be adopted.

Risk ID	Structure	Process	Current Target Outcomes	External/Independent Assurance
	What systems are in place? <i>(i.e. assurance meetings, action plans, roles etc.)</i>	How are these systems tested? <i>(i.e. tracking systems, minutes from meetings etc.)</i>	How will we know? <i>(i.e. action plans completed, risk analysis etc.)</i>	What assurance or validation from outside of the organisation is there? <i>(i.e. audit opinions, NHSI SOF ratings etc.)</i>

Impact of COVID-19

11. Further development of the principal risks and full population of the BAF was paused due to the Level 4 national incident and the Trust's response to COVID-19 in March 2020. However, through emergency governance arrangements put in place and the command structure established internally the members of the Board have received assurance and updates on the management of COVID-19 organisational risks through weekly NED assurance meetings. The Quality & Safety and Audit Committees have also remained in place and continue to receive updates on risk management.
12. During July and August as the Trust moves to the reset and restoration phase of the national COVID-19 response, the Board of Directors will reconvene to consider the risk themes previously identified and any changes in respect of the community services SOP, regional and local policy and the longer-term impact of COVID-19 on NHS organisations.



Board of Directors action

13. The Board of Directors is asked to note the update provided, the final position for the BAF 2019-20 reported and the next steps to develop the BAF for 2020-21.

Alison Hughes
Director of Corporate Affairs

5 June 2020



**Wirral Community
Health and Care**
NHS Foundation Trust

Board Assurance Framework 2019-20

The Board Assurance Framework (BAF) focus is only on the key strategic risks i.e. those that may affect the achievement of the Trust's strategic objectives

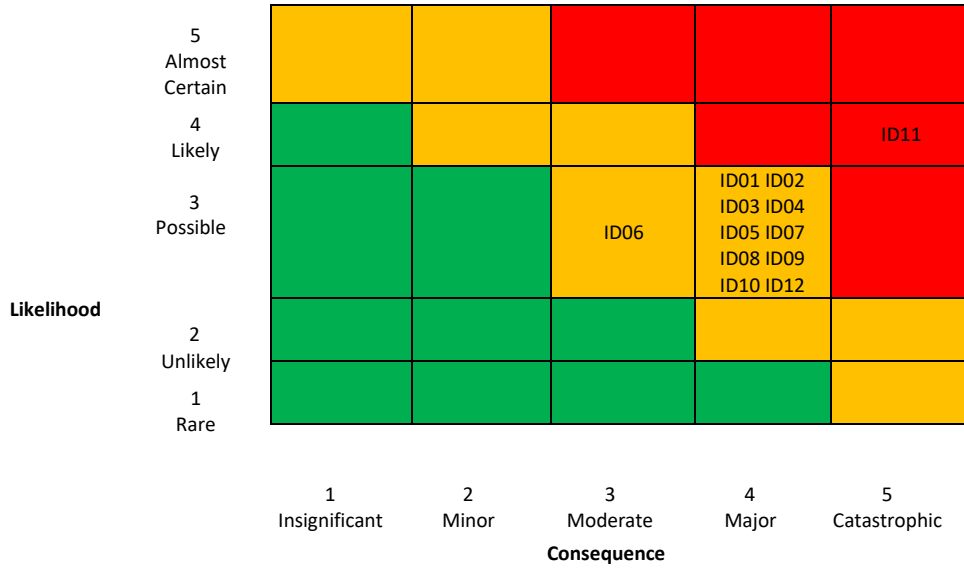
Risk ID	Executive Owner	Principal Risk	Current Rating (CxL) Consequence x Likelihood = Rating			Target Rating (CxL) Consequence x Likelihood = Rating			Trust Board Oversight
			C	L	Rating	C	L	Rating	
ID01	Director of Nursing	Non-compliance of our services with statutory, regulatory and professional standards.	4	2	8	4	1	4	Quality & Safety Committee
ID02	Director of Nursing	Citizens' health & wellbeing negatively affected by the delivery of sub-optimal quality services.	4	3	12	4	1	4	Quality & Safety Committee
ID03	Chief Operating Officer	Services are designed without consideration of current and future service user and potential service user health and social care outcomes and the need to address health inequalities.	4	3	12	4	2	8	Quality & Safety Committee
ID04	Medical Director	The configuration of Primary Care networks (PCN's) may disrupt and or restrict the ability of the Trust to maintain quality of our services to the detriment of our communities' health.	4	3	12	4	1	4	Board of Directors
ID05	Director of HR & OD	Failure to engage and support staff to deliver the Trust's vision and strategy for outstanding services.	4	2	8	4	1	4	Education & Workforce Committee
ID06	Director of HR & OD	Failure to build the staff skills, workforce infrastructure and career pathways to enable our staff to play their full part in an integrated delivery system.	3	3	9	3	2	6	Education & Workforce Committee
ID07	Director of HR & OD	Failure to recruit and retain the appropriate mix of staff to ensure services are delivered safely.	4	3	12	4	2	8	Education & Workforce Committee
ID08	Chief Operating Officer	Failure to foster, establish and manage the right partnerships that enable a response to the NHS Long Term Plan resulting in a threat to our sustainability.	4	3	12	4	2	8	Board of Directors

ID09	Chief Operating Officer	Failure to deliver the efficiency programme resulting in a reduction in service delivery and options for people.	4	1	4	4	1	4	Finance & Performance Committee
ID10	Chief Finance Officer	Failure to achieve all the relevant financial statutory duties	4	1	4	4	2	8	Audit Committee
ID11	Chief Operating Officer	The impact of the outcome of the Urgent Care Review that could negatively compromise on the trust's financial position and the UTC future model of care	5	4	20	3	3	9	Finance & Performance Committee
ID12	Chief Finance Officer	Failure to keep pace in digital advancements and innovation, and cyber-security guidance to improve health and social care outcomes.	4	3	12	4	2	8	Finance & Performance Committee

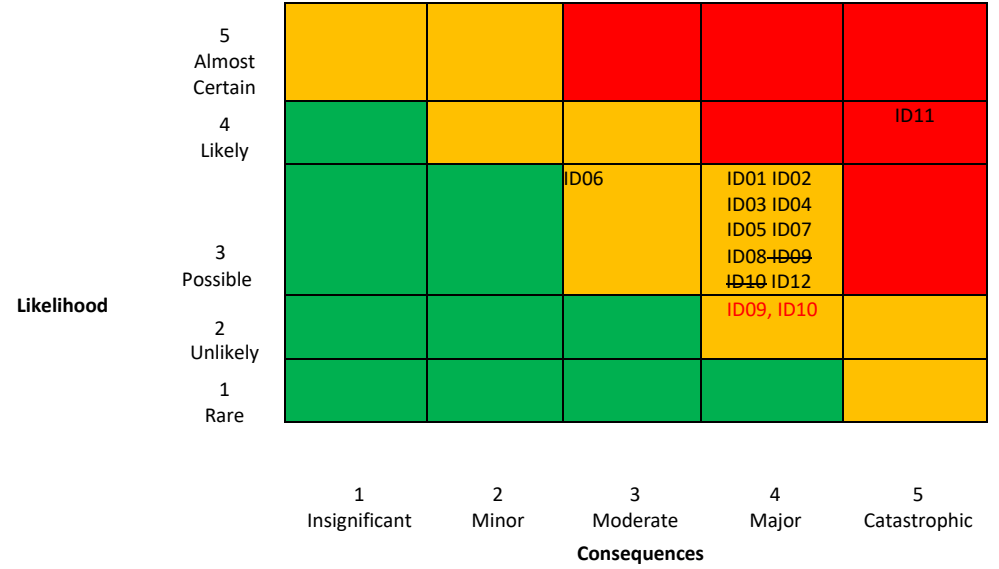
Risk Key



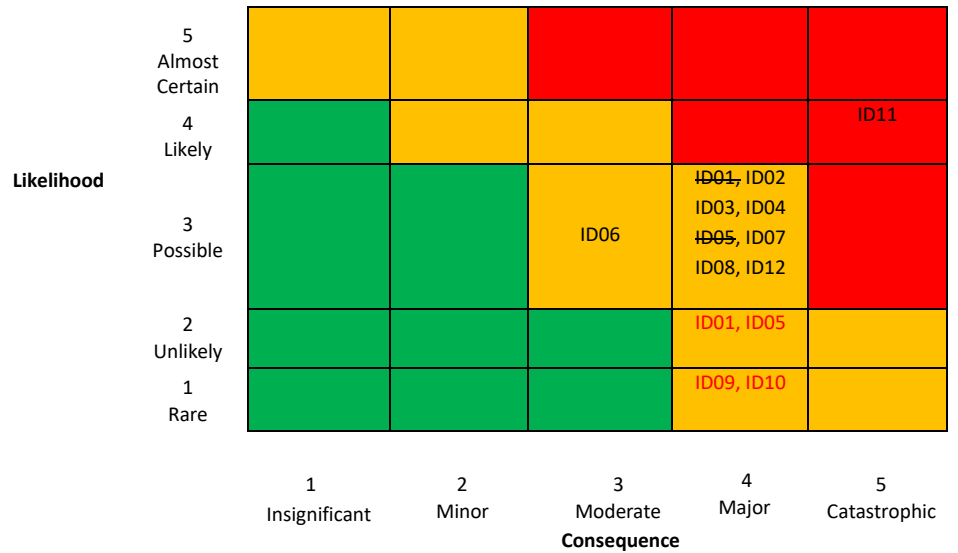
Risk Score Q1



Risk Score Q2



Risk Score Q3



Risk Score Q4

