

Board Assurance Framework (BAF)								
Meeting Board of Directors								
Date	03/02/2021	03/02/2021 Agenda item 9						
Lead Director	Alison Hughes, Director of Corp	Alison Hughes, Director of Corporate Affairs						
Author(s)	Karen Lees Head of Corporate	Karen Lees Head of Corporate Governance						
Action required (ple	Action required (please tick the appropriate box)							
To Approve ☑	To Approve ☑ To Discuss □ To Assure ☑							
Durmaga								

#### **Purpose**

The purpose of this paper is to provide the Board of Directors with assurance on the ongoing use of the Board Assurance Framework for 2020-21, and to consider and approve the proposed changes to the risk ratings for three principal risks.

#### **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.

In March 2020, the Board of Directors considered the Board Assurance Framework for the new financial year including a new outcome focused structure.

The Board of Directors has received papers during the year setting out details of the process for the development of the BAF for 2020-21. In August the revised structure for the BAF was agreed, with the principal risks agreed at the meeting of the Board of Directors in October 2020. Following this the Lead Executive Director and Non-Executive Director calculated the target and current risk ratings for each principal risk, together with the risk appetite and the tables detailing the controls and assurances underpinning each risk. This full Board Assurance Framework was presented to the Board of Directors and approved in December 2020.

The Board Assurance Framework remains in use by the members of the Board, and the risks to the delivery of the strategic objectives aligned to the phase 3 letter are considered through the emergency governance arrangements. The mitigations and controls for the principal risks are being monitored by the Lead Executive Directors

Due to the increased operational pressures and the Level 5 emergency response to the COVID-19 pandemic, the full Board Assurance Framework has not submitted to the Board of Directors in January 2021. Instead this report provides updates by exception on four principal risks – see attached report.

The highest principal risks remain for ID02 and ID06, both rated at RR16.

Six principal risks are rated at RR 12; these are ID01, ID03, ID05, ID08, ID11, ID12 and ID13.

The remaining principal risks are ID04 rated at RR8, ID07 rated at RR4, and ID09 and ID10 rated at RR9.

#### Risks and opportunities:

The BAF records the principal risks that could impact on the Trust's ability in achieving its strategic objectives. Therefore, failure to correctly develop and maintain the BAF could lead to the Trust not being able to achieve its strategic objectives.

There are opportunities through the effective development and use of the BAF, to enhance the delivery of the Trust's strategic objectives and effectively mitigate the impact of the principal risks contained within the BAF.

#### **Quality/inclusion considerations:**

Quality Impact Assessment completed and attached No

Equality Impact Assessment completed and attached No

The quality impact assessments and equality impact assessments are undertaken through 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

Please select the top three Trust Strategic Objectives that this report relates to, from the drop down boxes below.

Our Populations -	Our People - enhancing staff	Our Performance - increase
outstanding, safe care every	development	efficiency of all services
time	,	

#### Board of Directors is asked to consider the following action

The Board of Directors is asked to be assured of the ongoing use of the Board Assurance Framework, and review and approve the proposed amendments to the principle risks ID04, ID07 and ID08.

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 of Directors	10/06/2020	The Board received the year- end position for the BAF, and an update on the development of the BAF for the current year.							
Board of Directors	05/08/2020	The Board received an update regarding the development of the Board Assurance Framework for 2020-21, for assurance and discussion.							
Board of Directors	07/10/2020	The Board approved the principal risks as aligned to the priorities cited in the NHS Phase 3 response to COVID-19 letter.							
Board of Directors	02/12/2020	The Board approved the fully populated Board Assurance Framework, including the proposed slightly amended two principal risks							



## **Board Assurance Framework (BAF)**

#### **Board Assurance Framework 2020-21**

- 1. The Board has in place a full Board Assurance Framework that includes 13 principal risks which are aligned to the priorities outlined in the NHS Phase 3 response to COVID-19 requirements.
- 2. The principal risks are underpinned with detailed controls and assurance. These risks are tracked through the Board Assurance Framework (BAF) for the financial year 2020-21 and beyond (if necessary).

# January 2021 position - Exception reporting in the context of the third wave of the COVID-19 response

- 3. The Board Assurance Framework remains in use by the members of the Board and the risks to the delivery of the strategic objectives aligned to the phase 3 requirements are considered through the emergency governance arrangements. The mitigations and controls for the principal risks are being monitored by the Lead Executive Directors.
- 4. Due to the increased operational pressures and the Level 5 emergency response to the COVID-19 pandemic, the full Board Assurance Framework has not submitted to the Board of Directors in January 2021, however the following updates are reported by exception in the table below with key proposed revisions highlighted in red text.

		Risk	
	Principal risk	Rating (CxL)	Proposed revision - January 2021
04	Low uptake of staff flu and covid-19 (when it becomes available) vaccination programmes	3 x 2 = <b>6</b>	<ul> <li>Executive Lead to be transferred to Director of HR &amp; OD</li> <li>Remove reference to the staff flu programme as &gt;95% of eligible staff have received the vaccine - Low uptake of covid-19 vaccination programme</li> <li>Increase consequence from 3 to 4 i.e. 4 x 2 = 8 given the rise in community infections rates, the third national lockdown and Level 5 emergency response alongside winter pressures and the impact increased sickness absence would have on the ability to respond</li> <li>Mitigations for this risk have been strengthened with the addition of system-wide COVID-19 vaccination governance and system planning groups as well as the Trust's staff vaccination programme group which has put all the necessary arrangements in place. Significant challenges experienced with vaccine delivery, but impact mitigated by partnership working to ensure access to vaccinations. To date c.1,300 staff have received the first dose of the vaccine and invitations to receive the vaccine have now been sent to ALL staff, including students, contractors, bank and agency staff.</li> <li>Take up by division as well as by high risk group is monitored to identify if targeted</li> </ul>



	-		4.5	
ΝН	S FC	ninc	latior	า Trust

			action required.
05	Failure to restore community services in line with the NHS Third Phase response including crisis responsiveness and discharge to assess processes	4 x 3 = <b>12</b>	No change to risk rating or risk description is proposed, however given the third wave of COVID-19 and the Trust's increased response to the Level 5 emergency, the risk has been reviewed for progress and relevance of controls and mitigations in place.
07	Failure to deliver to the expansion of NHS111 First by agreed local timeframes	4 x 3 = <b>12</b>	<ul> <li>The service expansion was delivered in November 2020 as per local timeframes therefore risk has reached the target risk of 4 x 1 = 4</li> <li>The service delivery performance indicators are kept under review to ensure the best possible service is delivered</li> </ul>
08	Inability to safely meet the requirements of the NHS Third Phase response due to lack of availability of staff and reduced staff motivation (due to on-going COVID-19 pressures)	4 x 2 = <b>8</b>	<ul> <li>Increase likelihood from 2 to 3 i.e. 4 x 3 = 12 due to the slight increase in staff absence from COVID-19, new national lockdown restrictions for CEV staff shielding, the impact on staffing capacity levels and the further reassignment of staff <i>Mitigations:</i></li> <li>Step down of services to manage staffing has been impact assessed and agreed with system partners</li> <li>Recruitment campaign to Bluebell Ward has seen mixed success - HCA recruitment has been strong but the position for nursing and therapies is challenging. Campaign is ongoing but recruitment is difficult in current healthcare market.</li> <li>Significant reassignment process undertaken to support the establishment of Iris Ward. Staff drawn from across services to fill rosters.</li> <li>Large cohort of 3<sup>rd</sup> year student nurses secured to undertake HCA roles providing stronger skill mix.</li> <li>Challenges in releasing staff for training to support new role.</li> </ul>

#### Summary position of other principal risks

- 5. Of the principal risks not reported by exception above, there remain 2 high-level risks at RR16. These are;
  - ID02 Inability to measure equity of access, experience and outcomes for all groups in our community
  - ID06 Failure to restore NHS services inclusively to protect the most vulnerable
- 6. Both risks continue to be monitored in line with the requirements of the Phase 3 response to COVID-19 implementation guidance and service restart plans have been monitored through the Trust's Tactical Command Group, reported to the Executive Leadership Team and shared at the weekly NED assurance meeting. Given the impact of the third wave of COVID-



- 19, the mitigations and controls for these risks remain under constant review. In practical terms, the Trust is also ensuring any changes to service delivery are subject to appropriate impact assessments and effective communication with service users and the Primary Care community (via the CCG) is maintained.
- 7. Any services that have been partially stepped down as a result of the third wave of COVID-19 are still receiving referrals and triaging those in a higher risk category to be seen either via video consultation or F2F. All services are also phone call or letter contact for clinically lower risk patients.
- 8. Six risks are rated at RR12, with the remaining principal risks scoring between RR4 and RR10.
- 9. The summary position for all principal risks is attached with the supporting mitigation tables for each principal risk available as a separate PDF.

#### Development of more detailed outcomes for the principal risks

- 10. The current target outcomes for all the principal risks in the BAF are aligned to the delivery of the priorities set out in the NHS Phase 3 response to COVID-19 requirements, together with minimising the levels of COVID-19 infections in the communities we serve and in our workforce.
- 11. Further work is on-going to develop further detail against each of these outcome measures, but this has been slowed slightly to accommodate the current operational demands on the Executive Team.
- 12. The detailed outcomes will be presented to the Board of Directors for consideration and approval at a future meeting.

#### **Board of Directors Action**

- 13. The Board of Directors is asked to:
  - note the on-going use of the Board Assurance Framework
  - review and approve the proposed amendments to principal risks ID04, ID07 and ID08
  - note the position reported for ID05

Alison Hughes
Director of Corporate Affairs

Karen Lees Head of Corporate Governance

20 January 2021



# **Appendix 1**

## **Board Assurance Framework 2020-21**

### Top Risks - as at January 2021 2021

Risk ID	Executive Owner	Principal risk	CXL		Rating		
ID02		Inability to measure equity of access, experience and outcomes for all groups in our community	4	4	16		
ID06	Chief Nurse	Failure to restore NHS services inclusively to protect the most vulnerable	4	4	16		

The highest current risk ratings are ID02 and ID06 rated 16 and shown above.

Six risks currently have a risk rating of 12, these are ID01, ID03, ID05, ID07, ID11, ID12 and ID13

The remaining risk ratings are ID04 risk of 6, ID08 risk of 8, and ID09 and ID10 have a risk of 9.

## **Board Assurance Framework 2020-21**

The Board Assurance Framework (BAF) focuses on the key strategic risks and for 2020-21 have also been purposefully aligned to the priorities of the NHS Phase 3 emergency response to COVID-19. The current risk ratings are as at January 2021.

## **Summary Table**

Risk ID	Executive Owner	Principal Risk	Current Rating (CXL) Consequence x Likelihood = Rating		Target Rating (CXL) Consequence x Likelihood = Rating			Oversight (under emergency governance	
			С	L	Rating	С	L	Rating	arrangements)
ID01	Chief Nurse	Delivery of sub-optimal quality services negatively affecting citizens health and wellbeing	4	3	12	4	1	4	Quality & Safety Committee
ID02	Chief Nurse	Inability to measure equity of access, experience and outcomes for all groups in our community	4	4	16	4	3	12	Quality & Safety Committee
ID03	Chief Nurse	Non-compliance with statutory, regulatory and professional standards	4	3	12	4	1	4	Quality & Safety Committee
ID04	Chief Nurse Director of HR & OD	Low uptake of covid-19 vaccination programme	<del>3</del> 4	2	8	3	1	3	Quality & Safety Committee
ID05	Chief Operating Officer	Failure to restore community services in line with the NHS Third Phase response including crisis responsiveness and discharge to assess processes	4	3	12	4	2	8	Quality & Safety Committee
ID06	Chief Nurse	Failure to restore NHS services inclusively to protect the most vulnerable	4	4	16	4	2	8	Quality & Safety Committee
ID07	Chief Nurse	Failure to deliver to the expansion of NHS111 First by agreed local timeframes	4	1	4	4	1	4	Quality & Safety Committee
ID08	Director of HR & OD	Inability to safely meet the requirements of the NHS Third Phase response due to lack of availability of staff and reduced staff motivation (due to on-going COVID-19 pressures)	4	3	12	4	2	8	NED assurance meeting

ID09	Director of HR & OD	Failure to fully implement the requirements of the NHS People Plan to include an effective system approach to workforce planning and transformation	3	3	9	3	2	6	NED assurance meeting
ID10	Director of HR & OD	Failure to effectively deliver on the Trust's Inclusion intentions (and those set out in the NHS Third Phase response) through lack of representation in the workforce of all communities we serve	3	ഗ	O	3	2	6	NED assurance meeting
ID11	Chief Strategy Officer	Failure to establish and effectively manage the right partnerships to support the development of the regional Integrated Care System and Wirral's local Integrated Care Partnership	4	3	12	4	2	8	NED assurance meeting
ID12	Chief Finance Officer	A loss of funding and increased cost have a detrimental effect on the financial sustainability of the Trust post COVID-19	4	3	12	4	2	8	NED assurance meeting
ID13	Chief Strategy Officer	Failure to maintain effective cyber defences affects Trust reputation and causes IG breaches	4	3	12	4	2	8	Audit Committee NED assurance

# Principal risk summary grid - as at January 2021

