
Public Board Meeting, 29 September 2011

Board Assurance Framework

Presented by: **Colin Johnston, Director of Patient Safety, Medical Director**

Introduction

This paper informs the Board of the current position relating to the key risks to the achievement of the organisation's objectives. The risks are aligned to the strategic objectives contained in the Integrated Business Plan. The following is a summary of changes since the last Board meeting (July 2011).

On 15 September 2011 the Integrated Risk and Governance Committee (IRGC) considered the Board Assurance Framework and was informed that a draft 'Deep Dive Review' had been undertaken which identified a number of further opportunities to enhance the information contained on the BAF and thus enhance the level of assurance the Board can take from the BAF about the effectiveness of risk management controls and action plans. The Committee noted this will be reviewed by the Audit Committee and recommendations made to the Board accordingly.

The IRGC was presented with two risk assessments developed by the Acute Medical Care Division which sought to escalate these risks to the Board Assurance Framework. One risk related to issues of safety in the management of health records, in particular the hazards that exist for staff working in the current environment. The Committee concluded this was an operational risk which was not insignificant and therefore warranted close management but that this should be undertaken by the AMCD which has responsibility for the Health Records Management service. The Committee advised the risk owner to ensure that adequate controls have been put in place to manage and mitigate the risks to staff.

The other risk related to the ability of the AMCD to meet the CIP targets established for the division – the Committee concluded this was a risk that was also relevant to all service divisions but at this stage the risk should be escalated to the Delivery Support Group by the Executive Director of Delivery to consider whether sufficient controls are in place and sufficient management plans exist to mitigate the risk and therefore reduce the impact its realisation will have on the Trust's overall CIP targets.

Risk 2136 (Estates) has been updated to include 2 recent reports that give negative assurance in relation to the Trust's arrangements for the management and prevention of legionella and in relation to its arrangements for the management of asbestos.

Summary changes to the BAF

Following Board approval at the July meeting and subsequent to the decision made to remove Risk **1629** (Pathology system) and **2720** (NHSLA Level 2 achievement) and the addition of Risk **2768** (Pathology Transformation), there are currently **19** risks recorded on the Assurance Framework. All entries have been subject to review and updated with actions and assurances. The complete Assurance Framework can be found at **Appendix One**.

In July the IRGC raised the issue of the risks that relate to the East of England SHA's Pathology Transformation Project and agreed that a risk assessment should be undertaken and this has resulted in the addition of risk **2768** for Board consideration and approval.

Risk **2146** (relating to the Foundation Trust application) has been reviewed and the risk updated to reflect the actions required and identified in a recent letter to the Chief Executive by the Director of Provider Development. The risk is currently scored at 8.

It should be noted that Risk **2776** has materialised in that the Trust has breached the zero target for September by reporting an MRSA bacteraemia. The incident is currently being investigated and the risk score currently remains at 16 pending outcome of the investigation. Infection Control measures are being reinforced.

Following the review, a total of 10 entries have a current risk rating of 15 or above (red) and have ongoing mitigating actions summarised in Appendix 1. **See table following:**

Current Risk Rating	Risk Reference and Risk Description	Since Trust Board (July 2011)		ACTION (RISK TREATMENT)
		Change in Risk Rating	Previous Risk Rating	
8	2146 Failure to address the points highlighted in SHA letter and reflect progress related to delivery of the Integrated Business Plan.	●	8	MITIGATE
8	1465 Inadequate data quality to recover income and plan and monitor performance.	U	9	MITIGATE
9	1272 Lack of physical space to accommodate decontamination of equipment	●	9	TOLERATE
10	2722 PCT intention to reduce hospital based demand and reduction in income and reduction in capacity.	●	10	MITIGATE
10	1512 Risk to target to organise and treat patients within 18 week referral.	U	15	MITIGATE
12	2721 Failure to follow data confidentiality and systems security.	●	12	MITIGATE
12	2598 Failure to recruit, retain and motivate Staff.	●	12	MITIGATE
12	2767 Risk of exceeding annual HCAI targets.	●	12	MITIGATE
12	2768 Risk of loss of income and service viability if CPS unsuccessful in bid to provide direct access pathology services		NEW	MITIGATE
16	2659 Risks related to maternity staffing linked cost pressures against budget.	●	16	MITIGATE
	2596 Failure to influence and work with partners may impact on future income.	●	16	MITIGATE
	2145 Inadequate resilience in core IT systems	●	16	MITIGATE
	2143 Inability to discharge patients when acute medical care no longer required	●	20	MITIGATE
	2776 Risk of exceeding monthly targets set for HCAI will impact on Governance Performance	●	16	MITIGATE
	2286 Risk of failing to deliver £4.4m surplus and maintaining FRR of 3	●	20	MITIGATE
20	2287 Liquidity risk rating - Monitor	●	20	MITIGATE
	2719 Risk from sustained high levels of emergency admissions (demand)	●	20	MITIGATE
	2739 Risk to maintaining delivery of high quality maternity services.	●	20	MITIGATE
	2136 Residual Estates Issues	●	20	MITIGATE

Risk entries requiring Board approval of changes in current risk rating:

1. The Board is asked to approve the addition of the risk relating to the Pathology Transformation Project.

2768 If CPS bid unsuccessful the Trust may lose income and benefits derived from pathology services 12 (Amber)
2. The Board is asked to approve the reduction in the risk rating for 1512 and 1465.

3. The Board is also asked to consider the risk assessment attached that relates to lift 9, which is put forward for escalation to the BAF, subsequent to the IRGC meeting following the breakdown of the lift on Friday 16 September. The actions agreed to mitigate this long standing issues have been subject to change and the Board is asked to consider whether the risks posed to patient safety warrant its escalation to the BAF. This proposal is endorsed by the Director of Patient Safety, the Medical Director and the Director of Nursing.

Summary Risk Profile September 2011

Likelihood	5				2136 2719 2143 2739	
	4				2145 2659 2596 2776	2286 2287
	3				2767 2721 2768 2598	
	2				1465 2146	1512 2722
	1					
		1	2	3	4	5
		Consequences				

The Board is asked to note the addition of the summary risk profile relating to the distribution scores for risks on the BAF.

Colin Johnston
Medical Director
September 2011