# Public Board Meeting, 29th November 2012 Part 1 Item 10/12

## **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 (September 2012). On 8<sup>th</sup> November 2012 the Integrated Risk and Governance Committee (IRGC) considered an earlier draft of the Board Assurance Framework.

#### **Summary**

There are currently **24** risks recorded on the Assurance Framework. All entries have been reviewed. Actions and assurances have been updated where appropriate.

**Issues raised by IRGC on 8<sup>th</sup> November 2012:** The Committee reviewed the Board Assurance Framework and the following issues were raised relating to specific risks.

**BAF 1272** (Decontamination) was reviewed and a compliance update provided by the (Interim) Director of Strategy and Infrastructure. The risk score remains at 9 however the Committee agreed that reasonable assurances were in place to manage the risks.

**BAF 2766** (Infection Control) was reviewed and the Director of Patient Safety, Medical Director noted that the Trust was very close to the year-end trajectory placing us at risk of a significant financial penalty. The Committee was assured that controls are robustly implemented and that ongoing mitigating actions are being achieved. .

BAF 2719 (Increase in emergency demand) was reviewed. The discussion focused on the challenges posed by achieving necessary improvements with partner agencies and the Committee was informed that a programme of work was being taken forward to address internal and external processes. The Committee was apprised of the risks associated with the use of the cardiac catheter lab as a surge unit and that a risk assessment had been undertaken which found that the protocol for using the unit as a surge unit was not being fully adhered to. A number of improvement actions have been agreed and are being implemented. Compliance is being monitored weekly. The Committee agreed that this issue should not be reflected as a specific risk on the BAF but that risks associated with the use of the cardiac catheter lab would continue to be recorded against 2719.

**BAF 2768** (Pathology) The Director of Finance apprised the Committee of concerns relating to the consolidation of pathology services which pose a risk to both the financial position and to staffing of services. The attribution of costs of transition remains unresolved and the service is losing staff that cannot be replaced easily as posts are being recruited on a fixed term basis only and this could present a threat to service continuity.

**BAF 2828** (DATIX) The Committee was advised that the server supporting the software will be upgraded, leaving a business case to be submitted for software upgrade. The server would improve functionality.

#### Conclusion

Following these reviews of the BAF a total of **11** entries have a current risk rating of 15 or above (red) but all have controls in place and ongoing mitigating actions being implemented. There follows a Summary Risk profile indicating current scores and current levels of assurance. The Board is asked to approve the conclusions drawn in relation to the level of assurances in place and identify risks for which further assurance is required.

### **Dr Colin Johnston**

Director of Patient Safety, Medical Director