

<b>REPORT TITLE:</b>	Board Assurance Framework Report		
<b>SPONSORING EXECUTIVE:</b>	Kam Dhami, Chief Governance Officer		
<b>REPORT AUTHOR:</b>	Dan Conway, Associate Director of Corporate Governance / Company Secretary		
<b>MEETING:</b>	Public Trust Board	<b>DATE:</b>	8 <sup>th</sup> May 2024

### 1. Suggested discussion points *[two or three issues you consider the Trust Board should focus on in discussion]*

The Quarter 4 update of the Board Assurance Framework (BAF) provides an overview of the principal risks to the Trust's objectives and highlights key changes since the previous presentation.

Key Changes this Quarter:

- Notable revisions include adjustments to risk scores based on progress and challenges identified during discussions between committees.
- Transfer of impact descriptions between committees aims to streamline risk management processes and enhance alignment with organisational objectives.

### 2. Alignment to our Vision *[indicate with an 'X' which Strategic Objective[s] this paper supports]*

OUR PATIENTS		OUR PEOPLE		OUR POPULATION	
To be good or outstanding in everything that we do	X	To cultivate and sustain happy, productive and engaged staff	X	To work seamlessly with our partners to improve lives	X

### 3. Previous consideration *[at which meeting[s] has this paper/matter been previously discussed?]*

At all Board Committees in April 2024

### 4. Recommendation(s)

The Public Trust Board is asked to:

- AGREE** the recommended risk score changes to BAF001, BAF002 and BAF003
- AGREE** the transfer of the impact description relating to workforce issues between the Quality Committee to the People Committee.
- APPROVE** the current position of the BAF risks and scores.

### 5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and, where shown, elaborate in the paper]*

Board Assurance Framework Risk 01	X	Deliver safe, high-quality care.
Board Assurance Framework Risk 02	X	Make best strategic use of its resources
Board Assurance Framework Risk 03	X	Deliver the MMUH benefits case
Board Assurance Framework Risk 04	X	Recruit, retain, train, and develop an engaged and effective workforce
Board Assurance Framework Risk 05	X	Deliver on its ambitions as an integrated care organisation

# SANDWELL AND WEST BIRMINGHAM NHS TRUST

## Report to Public Trust Board on 8<sup>th</sup> May 2024

### Board Assurance Framework Update

#### 1. Introduction

- 1.1 The Board Assurance Framework (BAF) sets out the principal risks to the delivery of the Trust's strategic objectives. This version represents the Quarter 4 position and details updates made since the BAF presentation was approved by the Trust Board in January 2024.

#### 2. Key Changes to the BAF in quarter 4 2023/24

2.1 **Quality Committee (BAF001): *There is a risk that the Trust fails to deliver constant safe, high-quality care.***

- A proposed revision to the risk rating score through a **reduction** of the likelihood from a 4 to a 3. This will reduce the overall score to 4x3 = 12. The rationale for this reduction is;
  - Momentum in the embedment of Fundamentals of Care
  - An absence of serious incidents in medicines management for the last 12 months
  - Good progress on CQC inspection preparedness
  - Patient Safety Incident Response Framework (PSIRF) implemented across the Trust.
  - Following discussions between the leads for the People Committee and the Quality Committee there was an agreement for the workforce issues to transfer from Quality Committee BAF to People Committee BAF.
- The key controls and assurances are visible throughout the committee agenda and group exception reports from the Executive Quality Committee are detailed and offer assurance against the work going on to improve quality & safety.
- The Committee understands that they will need to ensure that impetus on the closed actions, leading to the score reduction are embedded and provide sustained positive impact over the life of the BAF and discussed at each review.

2.2 **Finance and Productivity Committee (BAF002): *There is a risk that the Trust fails to make best strategic use of its resources.***

- A proposed revision to the risk rating score through a change to the Consequence and Likelihood score from C4 x L5 = 20 to **C5 x L4 = 20**. The rationale for this change in consequence is;

- A very challenging external financial environment and the consequence of not meeting the planned financial improvements.
  - Short term non-recurring measures being implemented.
  - Shortage of time to address recurrent improvement.
  - The systemwide approach to planning is placing extra pressure on trust.
  - The priority for 2024/25, aligned to our Strategic Planning Framework (SPF), is to deliver the financial plan and ensure recurrent financial improvement.
- The reduction in the likelihood was due to having local and system oversight and recovery plans in place with a grip and control structure.
  - The overall BAF and discussion is currently too financed focused, and more attention is needed to integrate productivity. The upcoming forward planner refresh, following the committee effectiveness review will support addressing this.

**2.3 People Committee (BAF003): *There is a risk that the Trust fails to recruit, retain, train, and develop an engaged and effective workforce.***

- A proposed revision to the risk rating score through a **reduction** of the likelihood from a 4 to a 3. This will reduce the overall score to 4x3 = 12. The rationale for this reduction is;
  - Implementation of the Workforce Optimisation Programme (e-rostering, e-job planning, sickness absence)
  - Good traction in the MMUH Workforce Programme.
  - People Plan programmes linked to culture and staff experience e.g. ARC Leadership and Team Effectiveness programmes being taken forward.
- The committee understand that even with the reduction in the score, the focus will need to remain in supporting the opening of MMUH, challenges in reducing sickness levels and meeting recruitment planned trajectories plus the requirement to improve staff engagement and retention. This will also support strengthening the controls and assurances within the BAF.

**2.4** The updated BAF summary in annex 1 (the full committee BAF details are contained in the Reading room) and the current risk ratings associated with each risk are shown below in a heat map, proposed changes to scores are highlighted in blue. The BAF is embedded within each Board committee's agenda and is reviewed on a monthly/quarterly basis by each committee (dependent on the committee cycle.)

### **3. Next steps**

**3.1** The next step will be to review the BAF for 2024/25 reflecting the development of the 2024/25 operational plan and objectives, informed by feedback from the Internal Audit Report on the Board Assurance Framework, building on the approach developed in the last two years and incorporating any learning from good practice examples elsewhere. The target will be to enable a Board discussion of BAF risks and risk appetite statement in an upcoming Board Workshop Day.

#### 4. HEATMAP

		Likelihood				
Consequence	Rare 1	Unlikely 2	Possible 3	Likely 4	Almost Certain 5	
5 Catastrophic	5	10	15	20	25	
4 Major	4	8	12	16	20	
3 Moderate	3	6	9	12	15	
2 Minor	2	4	6	8	10	
1 Insignificant	1	2	3	4	5	

#### 4. Recommendations

The Public Trust Board is asked to:

- a) **AGREE** the recommended risk score changes to BAF001, BAF002 and BAF003
- b) **AGREE** the transfer of the impact description relating to workforce issues between the Quality Committee to the People Committee.
- c) **APPROVE** the current position of the BAF risks and scores.

Dan Conway  
Associate Director of Corporate Governance / Company Secretary

29<sup>th</sup> April 2024

#### Reading Room:

- Committee BAF risks
- BAF Action Logs

	Objective	Principle Risk	Impact Description (ID)	Committee Assurance Rating for each ID	Initial Risk Score	Current Risk Score	Target Risk Score	Recommended risk score for Q4	
Quality Committee		001: There is a risk that the Trust fails to deliver constant safe, high-quality care.	Significant Failure to deliver the standards of quality and safety for patient care across the Trust resulting in substantial incidents of avoidable harm and poor clinical outcomes	AMBER	16	16	12	4x3	12
			Insufficient understanding and embedding of learning following significant events/incidents/complaints and evidencing improved practice and clinical outcomes. (PSIRF)	AMBER					
			Safe & skilled workforce not achieving adequate numbers & skill mix impacts on the ability to deliver safe care, effective outcomes and organisational objectives.	AMBER					
			A lack of a trust-wide systematic approach that is understood and owned by the organisation resulting in reduced patient experience and missed opportunities	AMBER					
Finance and Productivity Committee	PATIENTS: To be good or outstanding in everything we do	002: There is a risk that the Trust fails to make best strategic use of its resources	failure to ensure adequate infrastructure, capacity and governance to deliver CIP with insufficient prioritisation of CIP delivery to ensure success	AMBER	16	20	4	5x4	20
			Estates strategy needs to ensure rationalisation and utilisation are maximised. There is also a risk that there are insufficient capital resources to progress required investments	AMBER					
			Income and Expenditure performance resulting in cashflow challenge to operations and capital investments	AMBER					
			Lack of capacity to effectively plan to address strategic risk	AMBER					
			Failure to meet operational performance targets	AMBER					
			Failure to adopt and exploit digital solutions that can enhance patient care and improve efficiency.	AMBER					
People Committee	PEOPLE: To cultivate and sustain happy, productive, and engaged staff	003: There is a risk that the Trust fails to recruit, retain, train, and develop an engaged and effective workforce.	Plan, attract, recruit, and develop (workforce planning and safe staffing).	AMBER	16	16	4	4x3	12
			Staff experience and retention (culture and climate).	AMBER					

Integration Committee	POPULATION: To work seamlessly with our partners to improve lives.	004: There is a risk that the Trust fails to deliver on its ambitions as an integrated care organisation	Failure of the Trust to engage in shared planning and decision-making at System and Place partnership level.	AMBER	16	12	8		4x3	12
			Failure to redesign the model of care to build on attendance avoidance, Admission avoidance and Length of stay reduction resulting in a growth for acute hospital services.	AMBER						
			Failure to address directly the Health inequalities of each town footprint by using the core 20 plus 5 model resulting in deteriorating population health.	AMBER						
			Failure to work with partners in our role as an anchor institution to collectively address the wider determinates of health within our population resulting in poorer life chances.	AMBER						
MMUH Opening Committee		005: There is a risk that the Trust fails to deliver the MMUH benefits case	There is significant failure to deliver sustained clinical transformation and related benefits case resulting in inability to fit into MMUH and non-delivery of improved health outcomes and patient experience.	AMBER	16	20	15		5x4	20
			Failure to secure revenue funding for the workforce model needed to deliver the approved and transformed clinical model, which will impact on the ability to deliver the strategic benefits related to both the clinical and workforce models.	AMBER						
			Failure to secure capital funding and progress build for the on-site Urgent Treatment Centre which will result in increased and overwhelming demand in the Emergency Department, compromising Urgent Emergency Care standards associated with the business and benefits case.	AMBER						
			A significant failure to prepare our workforce to move and work in MMUH and adopt new ways of working, that results in suboptimal delivery of clinical transformation and delivery of the people objectives and associated benefits case.	AMBER						
			There is failure to establish an effective strategic benefits oversight and delivery framework that results in the inability to provide assurance on the delivery of the strategic benefits case.	AMBER						
	Failure to secure capital funding and progress digital transformation and SMART optimisation at MMUH will compromise the digital impact on the strategic benefit case.		AMBER							