

Meeting:	Brighton and Sussex University Hospitals NHS Trust Board of Directors
Date:	29th March 2016
Board Sponsor:	Director of Corporate Affairs and Company Secretary
Paper Author:	Head of Risk Management
Subject:	Board Assurance Framework (BAF) – Quarter 3

Executive summary

The Board Assurance Framework describes the key risks to the Trust strategic objectives. Executive leads have reviewed their responsible risks with the Head of Risk Management and/or Director of Corporate Affairs.

Risks have been reviewed at the Finance, People and Performance Committee and Quality and Risk Committee.

As agreed at the Board of Directors, the following risks have been added to the Board Assurance Framework:

- Leadership and management – capability and accountability
- Low levels of staff engagement

The risk grading has been elevated to 25 for the following risk:

- Inability to deliver financial plan

The Board is asked to note that a revised BAF will be developed for 2016/17, aligned to the Annual Plan.

Links to corporate objectives	The reports describes the key risks to the corporate objectives of <i>excellent outcomes; great experience; high productivity; and empowered, skilled staff</i>
Identified risks and risk management actions	Risk management actions are detailed for each of the risks.
Resource implications	None relevant to the report
Report history	Executive Directors; Finance, People and Performance Committee; Quality and Risk Committee
Appendices	Board Assurance Framework (BAF) Control Templates Report for Quarter 3 of 2015/16

Action required by the Committee

The Board is asked to:

- Note the risks added to the BAF
- Review the risk rating of the BAF risks to ensure the risks are rated appropriately.
- Determine any gaps in the controls and/or assurance for each of the risks in order to ensure that risks are managed adequately.
- Horizon scan to determine whether any new risks should be included in the BAF

Ref BAF	Risk Description	Exec lead	Trust Objective / Fundamental	Current Risk Rating	Movement from Last Review	Lead Assurance Committee
1	Failure to deliver the required changes in capacity to support achievement of key access targets, quality of care, patient and staff experience	Director of Change	Aligning capacity and demand	16	↔	Board of Directors
2	200 year old clinical infrastructure at RSCH and 75 years old infrastructure at HWP which is no longer fit for purpose.	Director of 3Ts	All corporate objectives Site reconfiguration Modern estate - 3Ts	15	↔	Board of Directors
3	Non-compliance with regulatory standards and statutory duties leading to regulatory or enforcement action	Chief Nurse & Medical Director (Safety & Quality); Director of People (Equality); Director of Health Informatics (Information Governance);	Excellent outcomes Great experience	20	↔	Quality and Risk Committee
4	Adverse outcomes and experience for patients arising from poor patient flow	Chief Operating Officer	Excellent outcomes Great experience	20	↔	Quality and Risk Committee
5	Failure to ensure that there is enough suitably qualified, skilled and experienced staff to meet the needs of all patients across all services.	Medical Director & Chief Nurse	Excellent outcomes Great experience Empowered & skilled staff	20	↔	Quality and Risk Committee
6	Inadequacy of whistle-blowing arrangements inhibits development of learning and improvement culture	Director of People	Excellent outcomes Great experience	16	↔	Quality and Risk Committee
7	Inability to deliver financial plan	Chief Financial Officer	High productivity	25	↑	Finance, People and Performance Committee
8	Staff and patients may be put at risk from failure to maintain adequately the estate, equipment and facilities management services	Chief Financial Officer	Excellent outcomes Great experience Modern estate	16	↔	Finance, People and Performance Committee

Ref BAF	Risk Description	Exec lead	Trust Objective / Fundamental	Current Risk Rating	Movement from Last Review	Lead Assurance Committee
9	Inability to deliver consistently large scale business change	Director of Change	Excellent outcomes Great experience Empowered, skilled staff	16	↔	Finance, People and Performance Committee
10	Ability of the Trust and Local Health Economy partners to consistently deliver performance standards	Chief Operating Officer	Great experience	20	↔	Finance, People and Performance Committee
11	Poor data quality may have adverse impact on planning, delivery and assurance	Chief Financial Officer	Top productivity	12	↔	Finance, People and Performance Committee
12	Leadership and management – capability and accountability	Medical Director, Director of People and Chief Nurse	Empowered, skilled staff Excellent outcomes Great experience High productivity	20	N/A	Finance, People and Performance Committee
13	Low levels of staff engagement	Medical Director, Director of People and Chief Nurse	Empowered, skilled staff Excellent outcomes Great experience High productivity	20	N/A	Finance, People and Performance Committee