BOARD MEETING

Title	Board Assurance Framework (BAF)										
Paper Date:	7 May 2024	Meeting Date:	21 May 2024								
Purpose:	Assurance	Agenda Item:	14								
Author:	Lynn Casey-Sturt, Governance Manager (Corporate Governance)	Exec Lead/ Senior Responsible Officer:	Catherine Mountford, Director of Governance								

Executive Summary

The Board Assurance Framework (BAF) sets out the principal risks to the achievement of the ICB's strategic objectives and is a practical means through which the Board can assess controls against delivery of these. In doing so, the BAF is also a primary source of evidence in describing how the ICB is discharging its responsibilities for internal control.

The BAF (Appendix 1) comprises eight strategic risks as defined by the Board and sets out the controls BOB has in place to manage these risks and the assurances applied to support judgements as to whether the controls are having the desired impact. It also describes the actions to mitigate each risk, whilst providing assurance that organisational risk reviews have been carried out.

BAF (Risk Score Map Report – Red Rated Risks) – High Level Review

The Board is notified of those risks which retain a residual score/rating of ≥ 15 RED; these are currently risks related to: Financial Sustainability and Access to Services, and shows that there has been no residual movement (Nov 2023 – Apr 2024)

BOB ICB	BOB ICB Strategic Risks/Board Assurance Framework (BAF)													
Prefix	Risk Title	Aggregated Control Score	Inherent Score	Residual Score	Target Score	Residual Direction of Travel	Residual 04/24	Residual 03/24	Residual 02/24	Residual 01/24	Residual 12/23	Residual 11/23		
BOB0002	Risk Title: Financial Sustainability Risk Owner: Matthew Metcalfe Directorate Lead: Matthew Metcalf	Adequate (0.50)	Very High (16)	Very High (16)	High (12)	\leftrightarrow	Very High (16)							
BOB0004	Risk Title: Access to Services Risk Owner: Matthew Tait Directorate Lead: Ben Gattlin	Substantial (1.00)	Very High (16)	Very High (16)	High (12)	\Leftrightarrow	Very High (16)							

To support Board assurance, the Audit and Risk Committee has oversight of the full BAF and Corporate Risk Register (CRR) generic heat map report which monitors residual movement across all risks. This supports identification of any risk(s) requiring a 'deep dive' or intervention.

CRR

The CRR is the mechanism to manage high level risks facing the organisation from a strategic, clinical, and business risk perspective, and comprises operational risks arising from the ICB's day-to-day activities.

The Board is notified of those risks on the CRR which retain a residual score/rating of ≥ 15 RED; these are currently risks related to: Financial Sustainability (in-year) and Financial Sustainability (long-term) and shows no residual movement (Nov 2023 – Apr 2024). The risks in relation to All Age Continuing Care (AACC) and the risk of increased issues against delegated healthcare tasks will be reviewed in more detail by the executive and then through the Audit and Risk Committee.

Prefix	Risk Title	Aggregated Control Score	Inherent Score	Residual Score	Target Score	Residual Direction of Travel	Residual 04/24	Residual 03/24	Residual 02/24	Residual 01/24	Residual	Residual
ORM0001	Risk Title: Increased issues against delegation healthcare tasks (DHTs) across BOB ICS. Risk Owner: Rachael Corser Directorate Lead: Zoe Woods	Adequate (0.50)	Very High (16)	Very High (16)	Low (4)	↑	Very High (16)	n/a	n/a	n/a	n/a	n/a
CHC0009	Risk Title: AACC Funded Nursing Care Risk Owner: Niki Cartwright Directorate Lead: Liz Hodgkinson	Limited (0.00)	Very High (20)	Very High (20)	Medium (6)	\leftrightarrow	Very High (20)	Very High (20)	Very High (20)	n/a	n/a	n/a
Prefix	Risk Title	Aggregated Control Score	Inherent Score	Residual Score	Target Score	Residual Direction of Travel	Residual 04/24	Residual 03/24	Residual 02/24	Residual 01/24	Residual 12/23	Residual
	Risk Title: Financial	Adequate (0.25)	Very High (16)	Very High (16)	High (12)	\leftrightarrow	Very High (16)					
SP0001	Sustainability (in year) Risk Owner: Matthew Metcalfe Directorate Lead: Matthew Metcalf	(0.23)										

Audit and Risk Committee (ARC) - Feedback

The Committee, as part of its internal review process, systematically reviews all updates provided in relation to risk management, acknowledging and seeking assurance of the controls and assurances the ICB has put in place. For Board awareness the following has been provided and discussed at ARC which is supported by the Audit Chair's report:

- The introduction of additional areas of reporting relating to approval of 'new/emerging' risks and request for consideration of 'closure' of risks to provide visibility and assurance.
- The reporting of 'risk deep dives' or 'internal reviews on risk' (quarterly), providing assurance around directorate management and review processes.
- Internal audit issued a final risk management report on the 12 March 2024, which provided BOB ICB with an audit opinion of 'substantial assurance', with four low management actions for consideration which are actively being addressed by the governance team.
- A Board Risk Workshop took place on the 19 March 2024, facilitated by our internal auditors RSM, supported by the Governance Directorate. The focus of this workshop was to enable the Board to set its 'risk appetite' for the coming year, it was agreed that further evaluation is required to understand in more detail the ICB's level of maturity in its acceptance and management of risk before accurate assessment of its 'risk appetite' can be taken forward for consideration, and ultimately agreement.

Action Required

The Board is asked to:

- Note the report.
- Note the BAF (Appendix 1) and CRR 'Red Rated Risks' detailed in this report

Conflicts of Interest:	No conflict identified
Date/Name of Committee/ Meeting, Where Last Reviewed:	Executive Management Committee: 8 April 2024 and 13 May 2024 Audit and Risk Committee: 23 April 2024



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Risk Crite	eria		Protect	IOD DI		Formania (DAF)									
						Framework (BAF) isks/Board Assurance F	Framework BAF								
Very High Reference	Risk Title and Ownership	Risk Description	Inherent Score	Residual Score	Target Score	Directorate / Governance Group / Assurances	BOB ICB Core Objectives	Ri Review	sk Review Last Review	Controls Detail	Score	Score Text	Actions Detail	Closed	Flagged for 'Deep
1154	Risk Title: Financial Sustainability Risk Owner: Matthew Melcaife Directorate Lead: Jenny Simpson Created: 17 Nov 2022	It the BOB integrated Care System is unable to manage its expenditure within its available resource Then: I will not deliver its financial plan and financial target. Resulting it: reputational damage and inability to deliver high quality services for patients.	Very High	Verv High	Hiah	Directorate: Finance Primary Responsible Governance Group: System Productivity	Improve outcomes, Tackle inequality, Enhance productivity, Social and economic development	Status Open	Actual Date 04 Jan 2024	NHSE financial controls implemented across all organisations within the system. All new expenditure by UCB approved by Executive Team, establishment of recovery plan, mornitoring of actions by Producivity Committee.	0.5	Adequate	In-year financial recovery plans being developed for discussion with NHSE. IECG to add additional focus to short term delivery in light of current financial pressures System reforecast submitted to NHSE on 22/11/2023 with forecast delicit for the System of orecast delicit for the System of		Dive*
1156	Risk Title: Access to Services Risk Owner:	If: the BOB health and care system is unable to schieve the restoration of NHS	Very High	Verv Hiah	Hiah	Directorate: Delivery Primary Responsible	Improve outcomes, Tackle inequality	Open	05 Apr 2024	established and work in progress NHSE assurance and oversight processes	1	Substantial	E47.6m, E27m worse than plan. Financial recovery board established and financial improvement/turnaround director in post. Additional UEC recovery plans requested for BHT & OUH	05 Apr 2024	
	Matthew Tait Directorate Lead: Ben Gattlin Created: 17 Nov 2022	unance to scrieve are restoration or NYTS services in line with 2023/24 priorities and operational planning guidance Then: the opputations of BOB will wait longer for clinical appointments and treatment Resulting in: poorer health outcomes for people across BOB				Primary Responsible Governance Group: Population Health and Patient Experience Committee	rackie inequality			Review at PHPE Committee System Wide Boards SOF Processes with Trusts	1 0.5	Substantial Adequate Substantial	Revised trajectories for waiting lists requested from all 3 Trusts	05 Apr 2024	
		people across BOB								Board Performance Reports	1	Substantial			
High Reference	Risk Title and Ownership	Risk Description	Inherent Score	Residual Score	Target Score	Directorate / Governance Group / Assurances	BOB ICB Core Objectives	Ri Review Status	sk Review Last Review Actual Date	Controls Detail	Score	Score Text	Actions Detail	Closed	Flagged for 'Deep Dive'
1155	Risk Title: Resilience Risk Owner: Matthew Tait Directorate Lead: Alexander Thompson Created: 17 Nov 2022	If: the BOB health and care system lacks resilience to respond to significant incidents, events and emergencies Then: services to the population of BOB will be affected Resulting in: poorer health outcomes for people across BOB	High	Hiah	Medium	Directorate: Delivery Primary Responsible Governance Group: Audit and Risk Committee	Improve outcomes, Tackle inequality, Enhance productivity	Open		NHSE EPRR Standards and Review Review through Audit and Risk Committee Production of Annual Report to	0.5 0.5	Adequate Adequate Limited		ı	
		outcomes for people across 505								Board Robust risk and capability management in partnership with stakeholders - LRF and LHRP EPRR work programme developed	0	Limited			
										against risks Internal Business Continuity Management System	0	Limited			
1157	Risk Owner: Robert Bower Directorate Lead: Hannah	If: the ICB is unable to establish and lead a n system-wide approach and culture of transformation Then: it will fail to achieve 2 the four core purposes set out by NHS England. Resulting in: non-compliance of	Very High	Hiah	Medium	Directorate: Strategy and Partnerships Primary Responsible Governance Group: System and Place	Improve outcomes, Tackle inequality, Enhance productivity, Social and economic	Open	10 Nov 2023	Integrated Care Strategy agreed. Joint Forward Plan agreed	1	Substantial Substantial	Further development of provider collaboratives and delegation of some agreed functions		No
		england. Resulting in: non-compliance or statutory requirements				Development Committee	development			Acute Provider Collaborative/Elective Care Programme with agreed work programme Urgent and Emergency Care system	0.5	Adequate Adequate	Development of Place moving to agreed level of delegated resources with LA Partner e.g., Health Inequalities Developing system Q1 approach. Whole system	02 Aug 2023	
										wide priorities Quarterly ICB/NHSE oversight and Trust tri-partite sessions Developing Suite of BOB system	0.5	Adequate Adequate	approach. Whole system education even in June.		
										strategies (gap) System Leadership Forum established - meeting frequently twice year (met 6 Nov 23)	0.5	Adequate			
1159	Risk Title: Working in Partnership Risk Owner: Matthew Tait Directorate Lead: Matthew Tait Created: 17 Nov 2022	If: BOB does not develop effective partnerships across place, system and beyond Then: it will be unable to respond to the needs of patients and public across BOB Resulting in: lost opportunities to	High	Hiah	Medium	Directorate: Delivery Primary Responsible Governance Group: System and Place Development Committee	Improve outcomes	Open	02 Feb 2024	NHSE assurance and oversight Review at SPD Committee	1	Substantial Substantial	Specific agenda item on Quarterly NHSE Review meetings to look at Partnership Development Update at PSD Committee		Yes
		deliver the right care at the right place and at the right time to address the full range of people's needs								SOF Processes with Trusts Board Reports & Updates Implementation of new Operating	1 1 0.5	Substantial Substantial Adequate	meetings on Partnership working / Acute Provider Collaborative and Mental Health Collaborative.		
										Model			Tripartile agenda prompt to be added to discuss parternship working at meetings Single Place focus at every Board meeting Board development sessions to be held on Acute Provider Collaborative and Mental Health Provider Collaborative. Produce structures to support teh new operating model and agree with partners Development of a new assurance & oversight framework.		
1160	Owner: Caroline Corrigan	If the BOSR health and care system is unable to affact and retain a suitably qualified workforce. Then, there is a qualified workforce. Then, there is a considerable of the suitable of the s	High	Hiah	Medium	Directorate: People Primary Responsible Governance Group: People Committee	Improve outcomes, Tackle inequality, Enhance productivity	Open	23 Jan 2024	System projects to be put in place to support our most challenged workforce 1. Collaborative absence management 2. Collaborative health and care recruilment 3. Managing our agency and bank temporary staffing 4. Collaborative staff turnover These projects are set out in our Jurit Forward Plan and People Strategy	0.5	Adequate	System projects to be put in place to support our most challenged workforce.		
	Risk Title and Ownership	Risk Description	Inherent Score	Residual Score	Target Score	Directorate / Governance Group / Assurances	Objectives	Review Status	sk Review Last Review Actual Date	Controls Detail	Score	Score Text	Actions Detail	Closed	Flagged for 'Deep Dive'
1153	rosk ine-result nequalities Risk Owner: Rachael Decaux Directorate Lead: Steve Goldensmith Created: 17 Nov 2022	in the Lob is thislate to imegrifier and rediffictively with its system partners in relation to improving health outcomes and could not of EOS will confirm us to experience inequalities and suboptimal outcomes and experience. Resulting in: poor outcomes and failure to support outcomes and failure to support broader social and economic development.	riign	Medium	wedium	Directorate: Medical Primary Responsible Governance Group: Population Health and Patient Experience Committee	Improve outcomes, Tackle inequality	Open	11 Apr 2024	The putting in place of agreed priorities as defined in JFP & Integrated Care Strategy to tackle health inequalities through Place and clinical programmes Governance Resourced Actions Population Health Management	0.5 0.5 0.5	Adequate Adequate Adequate Adequate	Place development plans for use of HI funding Prevention, Population Health and Reducing Health Inequalities meetings established and working well. Population Health Management Collaboration Group spreading good practice across system Mae and network with workforce		Yes
										Workforce	0.5	Adequate	leads to identify opportunities to influence training programmes to become more inequalities aware		
1158	Risk Tiak Custify and Safety Risk Owner Rachael Corser Directorate Lead Hedd Beddli Created: 17 Nov 2022	# he LIG does not have oversight of the provider risks to pully and safely, particularly those impacted by financial recovery There. It may be to maintain or improve the quality and safely of patient and applications of the pully and safely of patient and experience and potential harm.	Very High	Medium	Medium	Directories Huaring Primary Responsible Governance Group: Population Health and Patient Experience Committee	Improve outcomes, Tackle inequality	Open	10 Apr 2024	Operational and system quality groups embedded ICB Internal equality and quality impact assessment panel established ICB Internal equality and quality impact assessment panel established 2425 updated to include quality 4245 updated to include quality 4245 updated to include quality 4255 including outside quality founded key lines of enquiry founded key lines of enquiry founded key lines of enquiry and included quality founded power material health trusts internal quality founded power material method to the product of the production of the produc	A Risk/As	uurance Review	as Redesign of monthly quality Dashboart - April 2023 - 1st draft completed to Disebboart - April 2023 - 1st draft completed to Disebboart - April 2023 - 1st draft completed to Disebboart - April 2023 - 1st draft - April	02 Aug 2023	No
										updated for 24/25 ICB quality strategy to be published in 24/25					