BOB ICB BOARD MEETING

Title	Board Assurance Framework (BAF)		
Paper Date:	3 May 2023	**Meeting Date:**	16 May 2023
Purpose:	Assurance	**Agenda Item:**	10
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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 further sets out the controls in place to manage these risks and the assurances available to support judgements on whether the controls are having the desired impact. It additionally describes the actions to further reduce each risk.

This paper outlines progress to date and presents the BAF, (Annex 1), which captures the highest risks to the ICB delivering against its system priorities and meeting the Integrated Care System (ICS) four key aims.

- Improving outcomes in population health and health care
- Tackling inequalities in outcomes, experience, and access
- Enhancing productivity and value for money
- Helping the NHS to support broader social and economic development.

Embedding risk management supports achievement of the ICB's corporate objectives through managing risk to delivery.

The report also provides an update on the progress made in development of a comprehensive risk management process, ensuring a joined-up approach is adopted, to enact appropriate management and oversight of risk, both locally and across the wider collaborative.

Action Required

The Board is asked to:

- **Note** the report.
- **Identify** any strategic gaps and propose any areas where further investigation work may support further risk modification.

Conflicts of Interest:	No conflict identified

Date/Name of Committee/ Meeting, Where Last Reviewed:	Audit and Risk Committee, April 2023

Board Assurance Framework

Context

1. NHS Buckinghamshire, Oxfordshire, and Berkshire West (BOB) Integrated Care Board (ICB) has a statutory and regulatory obligation to ensure that systems of control are in place to minimise the impact of all types of risk, which could affect patients, staff, public resources, and the function of the ICB. This includes both the risk to the organisation and the risk to those individuals to whom the ICB owes a duty of care.

2. The Board Assurance Framework (BAF) provides the organisation with a simple but comprehensive method for the effective and focused management of the principal risks that may impede or assist in the ICB in meeting its strategic objectives and statutory obligations.

3. The BAF serves as the key document to assure the Board that risk management is firmly embedded in the organisation. One of the primary purposes of the BAF is to identify gaps in control or assurance in relation to these principal risks.

4. The BAF will be designed to ensure that there are clear links between the governance responsibilities of the Board, the lines of accountability across the Executive Directors, and the assurance activities of its committees. The development and agreement of the Joint Forward Plan will refine the ICB's core objective and the BAF will continue to iterate over the coming months.

5. The Audit and Risk Committee oversees the development of the wider risk management strategy and framework of which the BAF will be an element. The Audit and Risk Committee will also maintain oversight of the development of the BAF.

Progress to date

6. The Board previously discussed and agreed its system risks; with the agreement that further work is undertaken through appropriate governance routes to ensure consistency in approach and alignment; in terms of suitable controls and assurances.

7. The Audit and Risk Committee continues to provide oversight and receive updates on the development of the risk management process; assured and quantified by a recent Internal Audit review of BOB ICBs risk arrangements, reported to the April meeting. Recent updates included:

   a. Progress on the establishment of the Operational Risk Management Group (ORMG) established to oversee risk management across the ICB; providing substantial assurance that the controls upon which the organisation relies to manage this area are suitably designed, consistently applied and effective.

   b. Development of the risk management systems to ensure controls and actions are recorded for all risks.

   c. Consideration of an approach to risk appetite for each of the principal risks which will be reviewed by the executive and taken through committees for agreement.

   d. Progress with development of the Corporate Risk Register (CRR). The CRR currently contains 56 Risks: with inconsistencies in relation to the classification and scoring. Through the BOB ICB internal governance risk review process, these are being reviewed to ensure consistency of scoring and level of risk management.

Board Assurance Framework – Principal Risks

8. The principal risks agreed by the Board are set out in Annex 1. Each risk has a lead director (risk owner) and a defined Committee for oversight. While there are still some gaps, the Board can see that each risk is now scored and that key controls have been identified and most risks have defined actions to mitigate them recorded.

9. Through the next iteration of the risk management cycle (Directorate risk review, ORMG, Executive Management Committees, Board committees and Assurance and Risk Committee) the focus is on ensuring all risks have been reviewed, consistently scored and classified and that control and actions are identified.

System Risk Management

10. NHS England (NHSE), the Good Governance Institute (GGI), and ICB Risk Leads (including BOB) are working together in the development of a national set of System Risk management principles.

11. The system risk management principles will form part of a wider suite of co-designed materials to support Integrated Care Boards (ICBs) to self-assess their partnership governance arrangements (Item 14 on the agenda).

12. ICBs vary in their size, geography, and operational context in which they operate. There is a wide range of starting points to system risk management and all ICBs, as a partner in an ICS, are at various stages in developing their approaches to system risk. In the first instance our focus has been on developing the ICB's risk management arrangements.

13. System risk management arrangements will continue to develop and mature over time as systems themselves mature. It is anticipated that the principles outlined below, will help in informing and shaping these arrangements:
    - **Continually grow trust across the system and build relationships**: to provide a strong basis for sharing accountabilities and responsibilities for system risk management.
    - **Communicate proactively and effectively**: to ensure all partners share an understanding of the risks the system faces and their role in managing them.
    - **Use the ICS aims as a reference point:** to ensure the system can deliver against its shared aims and objectives.
    - **Continually evolve system risk management**: to put learning and experience into practice with a view to maturing system risk management arrangements and increasing alignment.
    - **Clarify roles across organisations**: to ensure system risk management arrangements are collaborative, aligned, and streamlined.
    - **Respond collectively**: to enable all partners to contribute appropriately to the management of system risks.
    - **Have collective oversight and mutual accountability**: to ensure the arrangements and practice in relation to system risk management are effective and non-duplicative.

Next Steps

14. The next steps are to:
    - Continue to manage risks in a robust way.
    - Take forward and development risk management processes and procedures in a constructive and all-encompassing way; in line with best practice and lessons learnt.

BOB ICB Strategic Risks/BAF Report

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Risk Criteria	
Project	ICB Board Assurance Framework (BAF)
Risk Area	BOB ICB Strategic Risks/Board Assurance Framework BAF

Very High

Reference	Risk Title and Ownership	Risk Description	Inherent Score	Residual Score	Target Score	Directorate / Governance Group / Assurances	ICS Core Objectives	Controls Detail	Actions Detail
1156	Risk Title: Access to Services Risk Owner: Matthew Tait Directorate Lead: Ben Gattlin Created: 17 Nov 2022	If: the BOB health and care system is unable to achieve the restoration of NHS services in line with 2022/23 priorities and operational planning guidance then: the populations of BOB will wait longer for clinical appointments and treatment resulting in: poorer health outcomes for people across BOB	Very High	Very High (4:4=16)	High (4:3=12)	Directorate: Delivery Responsible Governance Group: Population Health and Patient Experience Committee	Improve outcomes, Tackle inequality	NHSE assurance and oversight processes Review at PHPE Committee System Wide Boards SOF Processes with Trusts Board Performance Reports	

High

Reference	Risk Title and Ownership	Risk Description	Inherent Score	Residual Score	Target Score	Directorate / Governance Group / Assurances	ICS Core Objectives	Controls Detail	Actions Detail
1154	Risk Title: Financial Sustainability Risk Owner: Matthew Metcalfe Directorate Lead: Matthew Metcalfe Created: 17 Nov 2022	If: the BOB health and care system is unbale to manage its expenditure then: it will not deliver its financial plan, resulting in: an unsustainable financial position and an increased challenge in driving improvements for patients	Very High	High (4:3=12)	Medium (4:2=8)	Directorate: Finance Responsible Governance Group: System Productivity	Enhance productivity	Financial reporting, all new expenditure approved by Executive Team, establishment of recovery plan, monitoring of actions by Productivity Committee	Working to achieve a financial 'break-even' position.
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 (4:3=12)	High (4:3=12)	Medium (4:2=8)	Directorate: Delivery Responsible Governance Group: Audit and Risk Committee	Improve outcomes, Tackle inequality, Enhance productivity	NHSE EPRR Standards and Review Review through Audit Committee Production of Annual Report Robust risk and capability management in partnership with stakeholders - LRF and LHRP EPRR work programme developed against risks Internal Business Continuity Management System	
1157	Risk Title: Transformation Risk Owner: Steve McManus Directorate Lead: Catherine Mountford Created: 17 Nov 2022	If: the ICB is unable to establish and lead a system-wide approach and culture of transformation then: it will fail to achieve the four core purposes set out by NHS England resulting in: non-compliance of statutory requirements	Very High	High (3:3=9)	Medium (3:2=6)	Directorate: Strategy and Partnerships Responsible Governance Group: System Productivity	Improve outcomes, Tackle inequality, Enhance productivity, Social and economic development	Integrated Care Strategy agreed. Joint Forward Plan in development (gap) Acute Provider Collaborative/Elective Care Programme with agreed work programme Urgent and Emergency Care system wide priorities	Further development of provider collaboratives and delegation of some agreed functions Development of Place moving to agreed level of delegated resources with LA Partner e.g., Health Inequalities Developing system Q1 approach. Whole system education even in June.

| | | | | | | | | | Quarterly ICB/NHSE oversight and Trust tri-partite sessions |
| | | | | | | | | | Developing Suite of BOB system strategies (gap) |

Reference	Risk Title and Ownership	Risk Description	Inherent Score	Residual Score	Target Score	Directorate / Governance Group / Assurances	ICS Core Objectives	Controls Detail	Actions Detail
1158	Risk Title: Quality and Safety Risk Owner: Rachael Corser Directorate Lead: Rachael Corser Created: 17 Nov 2022	If: the ICB does not have the correct quality assurance mechanisms in place then: it may fail to maintain or improve the quality and safety of patient services resulting in: poor patient care and experience and potential harm	Very High	High (4:3=12)	Medium (4:2=8)	Directorate: Nursing Responsible Governance Group: Population Health and Patient Experience Committee	Improve outcomes, Tackle inequality	a) Additional interim support in place b) Restructure proposal of team to support strengthening oversight underway c) Aligning of quality processes across Place d) System wide quality workshop undertaken e) New quality group in place to support oversight of internal quality processes	a) Redesign of monthly quality Dashboard - April 2023 b) Development of quarterly thematic reports - May 2023 c) Restructure consultation outcome implementation commences - March 2023 d) Quality Assurance framework developed - First draft March 2023 e) Quality Strategy developed - May 2023
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 deliver the right care at the right place and at the right time to address the full range of people's needs	High (4:3=12)	High (4:3=12)	Medium (4:2=8)	Directorate: Delivery Responsible Governance Group: System and Place Development Committee	Social and economic development	NHSE assurance and oversight Review at SPD Committee SOF Processes with Trusts Board Performance Reports	
1160	Risk Title: Workforce Risk Owner: Karen Beech Directorate Lead: Jordan Archer Created: 17 Nov 2022	If: the BOB health and care system is unable to attract and retain a suitably qualified workforce then: this will result in missed opportunities to deliver services and/or work on the improvement agenda across the system resulting in: poorer outcomes, and failure in achieving the four core purposes set out by NHS England	High (3:3=9)	High (3:3=9)	Medium (3:2=6)	Directorate: People Responsible Governance Group: People Committee	Improve outcomes, Tackle inequality, Enhance productivity	System projects to be put in place to support our most challenged workforce 1. Collaborative absence management 2. Collaborative health and care recruitment 3. Managing our agency and bank temporary staffing 4. Collaborative staff turnover These projects are set out in our Joint Forward Plan and People Strategy	System projects to be put in place to support our most challenged workforce

Medium

Reference	Risk Title and Ownership	Risk Description	Inherent Score	Residual Score	Target Score	Directorate / Governance Group / Assurances	ICS Core Objectives	Controls Detail	Actions Detail
1153	Risk Title: Health Inequalities Risk Owner: Rachael Decaux Directorate Lead: Steve Goldensmith Created: 17 Nov 2022	If: the ICB is unable to integrate and lead effectively with its system partners in relation to improving health outcomes and reducing health inequalities then: the population of BOB will continue to experience inequalities and suboptimal outcomes and experience resulting in: poor outcomes and failure to support broader social and economic development	High (3:4=12)	Medium (4:2=8)	Medium (2:3=6)	Directorate: Medical Responsible Governance Group: Population Health and Patient Experience Committee	Improve outcomes, Tackle inequality	The putting in place of agreed priorities to tackle health inequalities through Place and clinical programmes	Place developing plans for use of H1 funding development of systematic approach to completion and reporting on Health Inequality Impact Assessments