



MEETING TITLE Trust Board		MEETING DATE 26 March 2013	
TITLE of PAPER	Board Assurance Framework including Corporate Risk Register	PAPER REF	5.2
STRATEGIC OBJECTIVE	To develop culture, systems and processes to support continuous improvement and innovation		
PURPOSE OF THE PAPER	The purpose of this paper is to inform the Trust Board on the end of year position for the Board Assurance Framework (BAF) 2012/13 and on the issues highlighted during the executive risk review process. It is also intended to provide assurance that risk management arrangements are being managed efficiently.		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input checked="" type="checkbox"/>
AUTHOR / LEAD	Kevin Wynn Associate Director Risk & Safety	ACCOUNTABLE DIRECTOR	Steve Page (Executive Director of Standards & Compliance)
PREVIOUSLY CONSIDERED BY	Committee/Group: Risk & Assurance Group Quality Committee Senior Management Group	Date:	28 February 2013 5 March 2013 13 March 2013
RECOMMENDATION	That the Trust Board accepts the content of the March 2013 and April 2013 iterations of the BAF and agrees to the proposals outlined in this paper.		
RISK ASSESSMENT		Yes	No
Corporate Risk Register and/or Board Assurance Framework amended		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify)		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Quality and Diversity Implications		<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Registration Outcome(s)	4, 7, 8, 9, 10, 11, 12		
NHSLA Risk Management Standards for Ambulance Trusts	1.4 1.5 2.2 2.5		

1. PURPOSE/AIM

- 1.1 The purpose of this paper is to inform the Trust Board on the end of year position for the Board Assurance Framework (BAF) 2012/13 and on the issues highlighted during the executive risk review process. It is also intended to provide assurance that risk management arrangements are being managed efficiently

2. BACKGROUND/CONTEXT

- 2.1 The March 2013 iteration of the Board Assurance Framework (BAF) contains the detail of 8 strategic objectives, and along with the Corporate Risk Register (CRR), the details of 12 strategic risks.
- 2.2 The structure and content of the BAF takes account of Audit Committee opinion and the views of executive and associate directors.
- 2.3 The BAF is closely aligned to the Corporate Risk Register, the Trust's five year Integrated Business Plan 2012-2017 and the Annual Business Plan for 2012-13.

3. RISK ASSESSMENT

- 3.1 The Risk and Assurance Group review the full content of the CRR and receive update reports from all business areas at each meeting. The Group determines the movement of risk and escalation of risk to the CRR and BAF, as appropriate.
- 3.2 The March 2013 iteration of the BAF is supported by separate risk movement and assurance movement reports. These reports provide detail on the actions taken to mitigate the strategic risks and any reports received that could provide the Trust Board with assurance. The CRR, BAF, Risk Movement Report and the Assurance Movement Report for March 2013 are all attached to this paper for reference.
- 3.3 The principal risks have been considered and reviewed at the Risk & Assurance Group, Trust Executive Group (TEG), Quality Committee, and individually by executive directors. The most recent reviews have taken place at the Risk & Assurance Group on 15 January and 28 February, TEG on 25 January, Quality Committee 5 March and with each individual Executive Director during March 2013. This report is based on the findings from these reviews.
- 3.4 There have been some positive movements against all of the principal risks, with some strengthening of controls. The executive risk review process highlighted some issues which will require further consideration. The Risk Movement and Assurance Movement reports summarise the findings from the executive review process, along with recommendations regarding the status of the risk and the current levels of assurance for each.

- 3.5 The Risk Movement Report, attached for reference, provides detail of progress against risk treatment plans for each risk on the CRR and BAF. In addition to the information provided in the Risk Movement Report, further detail is provided in this report on key pieces of work.

Data Management Systems (BAF5b – CRR69)

The first phase of the project implementation plan will be completed by the end 25 March 2013. This is the go-live date across the Trust for incidents, complaints and claims modules. The second phase, up to the end of July 2013 will primarily involve the education of other users and implementation of the risk module.

A critical element of the implementation plan required all managers to be trained in the use of Datix by the end of February 2013. A training programme was implemented in early November, with two hour training sessions delivered flexibly both in time and location to facilitate maximum attendance.

At the time of writing this report, there have been 60% of managers trained. The most significant gaps are within A&E Operations; North Yorkshire 12.5% and East Yorkshire and Hull 46.4%. The project manager has been working closely with managers throughout the project period in an attempt to deliver the required training. From the launch of the new data management system, incidents will be allocated to Locality Managers until such time as all other managers and supervisors are trained, to ensure that incidents are appropriately investigated.

Investigation Skills Training (BAF5b – CRR69)

Karen Warner, Associate Director for Quality has developed a bespoke investigation skills training programme, including basic investigation skills through to full root cause analysis (RCA). The programme was tested with a small group of managers in September 2012 and the intention is to rollout the training to all new Clinical Supervisors, Locality Managers, and managers and team leaders from across PTS, EOC and support functions.

The training was initially rescheduled to commence in April 2013. Further consideration will now be required to determine the best way forward with this essential piece of work, as part of the 2013/14 training plan.

Data Flagging Process (BAF2a – CRR66)

Good progress has been made against the EOC Serious Incident Review Action Plan, however; there have been further EOC related serious incidents reported in the last quarter. The Associate Director for Risk & Safety made a recommendation to the Quality Committee in March, which they approved, to undertake a further independent review, including the newly reported events.

The aim of the review will be to complete a more in depth analysis and identify other causal factors, taking account of when the incident occurred, activity and demand, and training programme methodology.

- 3.6 There are a number of additional emerging areas of concern in regard to the effective delivery of the strategic objectives;

Local Risk Management (BAF3b – CRR94)

It has been identified that there is variability in the implementation of the risk management process across local business areas, including in particular, the development and review of risk registers. The risk treatment plan for this risk will be updated to reflect the work required to improve this position.

Road Traffic Collisions (2011/12 BAF 2p and 1f – CRR43 & 44)

Risks relating to Road Traffic Collisions (RTCs) had been archived from the 2011/12 iteration of the BAF. These risks have been revisited as RTC incidents remain the highest incident reporting category. Whilst costs relating to RTCs have been reduced, the overall number of accidents (particularly minor vehicle damage) has not reduced. The risk treatment plan initially focused on accident reduction, and the development of policy and training initiatives. The risk treatment plan will be refocused on improvements to the overall accident management process and should continue to be monitored by the Health & Safety Committee.

Clinical Audit capability

A risk has been identified by Dr Julian Mark, Acting Medical Director, in his report to the Quality Committee on 5 March 2013. The Committee agreed that the risk relating to assurance on clinical practice when clinical audit processes are not fully implemented, should be considered for inclusion in the 2013/14 iteration of the BAF and CRR.

Hillsborough Disclosure Project

A risk has been identified by Caroline Balfour, Legal Services Manager, in her report to the Quality Committee in January 2013. The Committee agreed at its meeting on the 5 March, that the risk relating to a potential lack of capacity to manage the associated inquest and investigation processes, should be considered for inclusion in the 2013/14 iteration of the BAF and CRR. Following the executive review of the BAF, the risk owner, the Executive Director of Standards & Compliance has recommended that this risk is managed at directorate level.

Clinical Leadership (BAF3a – CRR 39)

At the Quality Committee on 5 March 2013, the Chair, Pat Drake, asked that the risk be reviewed in light of other factors now affecting the delivery of the Clinical Leadership Framework. The risk treatment plan for this risk will be updated to reflect the work required to address the concerns expressed at the Quality Committee meeting.

Document management

It has been identified that across all business areas there is variability in administration of updates to procedural documents, posing a risk to compliance with a range of external regulators, and with the potential to adversely impact on the welfare of staff and patients. The content of the risk treatment plan for BAF3b – CRR94 will be refocused to address these concerns.

- 3.7 The draft April iteration of the BAF has been developed, taking account of feedback from the comprehensive review undertaken by key committees and executive directors during February and March, and provides the detail summarised in this paper. The draft April 2013 BAF will be presented to the Board for discussion and approval at its meeting in April.
- 3.8 The Trust's five year Integrated Business Plan 2012-2017 contains the details of the top five risks linked to the strategic objectives. These risks are listed below under references from the March 2013 BAF.
- a) BAF3a/CRR103 (Downside risk 2)
Inability to deliver performance targets and clinical quality standards
 - b) BAF4a/CRR104 (Downside risks 4 and 10)
Loss of income due to inability to secure/retain PTS and other significant service contracts, adversely influencing future service commissioning intentions
 - c) BAF5a/CRR105 (Downside risk 5)
Inability to deliver service transformation and organisational change, including non-delivery of cost improvement programmes
 - d) BAF7a/CRR74 (Downside risk 2)
Adverse impact on organisational performance and clinical outcomes due to significant events impacting on business continuity
 - e) BAF8a/CRR93 (Downside risks 9 and 10)
Adverse impact on developments in urgent/unscheduled care services in partnership with other providers due to failure to implement 111 service/WYUC provision

It is proposed to retain BAF3a, 4a, 5a and 7a on the April BAF, with some refocusing of risk treatment plans. It is proposed that BAF 8a, as it is written in the March 2013 iteration of the BAF, be removed. A replacement to this risk is detailed in the April iteration of the BAF.

4. PROPOSALS/NEXT STEPS

- 4.1 Subject to Board approval the March 2013 iteration of the BAF will represent the close down position of the 2012/13 BAF. This document will then inform the content of the Annual Governance Statement for 2012/13.
- 4.2 Further consideration will need to be given to the top five risks to the strategic objectives, detailed in the Trust's five year Integrated Business Plan 2012-2017. At its next meeting in April, arrangements have been made for the Board to undertake a full review of the risks in the draft April 2013 iteration of the BAF, to determine a revised top five risks to the strategic objectives and to approve the contents of the 2013/14 BAF.
- 4.3 It is anticipated that further work will be required by executive directors to fully complete the detail on the April BAF, in particular consideration of refocused risk treatment plans. It is also proposed that the new BAF will include the detail of monitoring committees and those providing assurance.
- 4.4 Subject to Board approval the draft April BAF will provide the first iteration of the 2013/14 BAF.

5 RECOMMENDATIONS

- 5.1 That the Trust Board accepts the content of the March 2013 and April 2013 iterations of the BAF and agrees to the proposals outlined in this paper.

6. ATTACHMENTS

- 6.1 The Corporate Risk Register – 13 March 2013
- 6.2 The Board Assurance Framework – March 2013
- 6.3 Risk Movement Report – March 2013
- 6.4 Assurance Movement Report – March 2013