



Board Assurance Framework 2020-21

March 2021	Version 2.0
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Trust Management Group	31 March 2021
Audit Committee	13 April 2021
Trust Board	27 April 2021
Quality Committee	11 March 2021
F&I Committee	11 March 2021

CEO – Chief Executive Officer
EDF – Executive Director of Finance
ED.QGPA – Executive Director of Quality, Governance and Performance Assurance
ED.Ops – Executive Director of Operations
D.WF&OD – Director of Workforce and Organisational Development
D.IUC – Director of Integration and Urgent Care
EMD – Executive Medical Director
AD.CA – Associate Director of Corporate Affairs

Strategic Ambitions: One Team, Best Care 2018-23

Patients and communities experience fully joined-up care responsive to their needs

Our people feel empowered, valued and engaged to perform at their best

We achieve excellence in everything we do

We use resources wisely to invest in and sustain services

Table 1: showing progress in risk mitigation versus initial risk grading projected for the relevant quarter.

Actual and projected risk level is calculated as *Consequence x Likelihood*

Areas of Strategic Risk		Apr 20	Projected Risk Exposure				Move ment	Q4 actual	Progress Notes	Deviations from projections
			Q1	Q2	Q3	Q4				
Patients and communities experience fully joined-up care responsive to their needs	1a) Ability to deliver and sustain the required performance standards and service developments in 999/A&E operations	20	20	12	20	16	↓	16	All response performance measures were impacted in late Q3 with increases across both mean performance and 90th percentiles. Increases in demand across the festive period caused specific peaks which adversely affected the response performance whilst increases in job cycle times and increased levels of sickness and absences reduced resource availability. Hospital handover times have increased due to winter pressures and COVID-19 impact. Planning has commenced for a demand modelling exercise with support of ORH.	No deviation from quarterly projection
	1b) Ability to deliver the required performance standards and service developments in Integrated and Urgent Care	16	16	12	20	16	↓	16	Despite winter pressures and ongoing COVID-19 challenges performance by the end of Q3 was improving. Demand (calls answered) was much lower than forecast and call performance was excellent and well above target levels. Clinician call backs made within 1 hour was below target but showing substantial improvement. Core clinical advice tracked just below the level target, despite clinical demand being much higher than forecast. Staffing levels were affected by COVID outbreaks and clusters. Planning has commenced for a demand modelling exercise with support of ORH	No deviation from quarterly projection
	1c) Ability to deliver the required performance standards and service developments in the Patient Transport Service	16	16	12	12	12	↔	12	Contractual KPI performance measures have been suspended in line with NHS England guidance due to COVID 19. PTS is maintaining a good level of service for renal patients. On-day discharge performance is good despite demand rising dramatically. Call answer performance is closer to target levels since a dip in the summer. Demand has been steady at 80% pre-COVID levels; but this requires 25% additional PTS capacity due to single patient occupancy and other COVID response requirements. Planning has commenced for a demand modelling exercise with support of ORH	No deviation from quarterly projection
	1d) Ability to influence and respond to system-wide developments in urgent and emergency care	12	12	12	12	12	↔	12	Trust recovery and future development is closely aligned with regional and national requirements via ICS. The Trust is represented on ICS Boards and continues to influence strategic and operational developments at system and place level. Specific developments into the Trust's integral role in the delivery of the system-wide IUEC programme and its development of mental health provision. The Trust is actively engaged with national reviews of PTS and IUC services and with wider government plans for reform of health structures.	No deviation from quarterly projection

Areas of Strategic Risk		Apr 20	Projected Risk Exposure				Move ment	Q4 actual	Progress Notes	Deviations from projections
			Q1	Q2	Q3	Q4				
Our people feel empowered, valued and engaged to perform at their best	2a) Ability to ensure provision of sufficient clinical workforce	16	16	16	20	16	↓	16	Initiatives to develop the current and future supply of clinical workforce across service lines have continued during COVID. The post -registration career framework for paramedics has been agreed, the post registration career framework for clinicians is in development and further work is underway to develop strategic workforce planning processes aligned to the forthcoming demand modelling exercise. Sickness absence, particularly short-term absence, remains of concern due to COVID. The Trust is starting to see a number of staff with 'long 'COVID and hence long term absence is likely to increase over the coming months. The impact of COVID vaccinations is created short-term pressures on staff availability.	No deviation from quarterly projection
	2b) Ability to support the physical and mental health and well-being of staff	16	16	12	16	12	↔	12	Multiple initiatives to protect the physical and mental well-being of staff are in place. Workplace environments and practices have been made COVID-secure. A menu of mental health support is available. Sickness absence, particularly short-term absence, remains of particular concern due to COVID. The COVID vaccination programme is reaching thousands of staff and volunteers but is creating short-term pressures on staff availability.	No deviation from quarterly projection
	2c) Ability to embed strategies to meet statutory and regulatory requirements and the Trust's own ambitions relating to diversity and inclusion	16	16	16	12	12	↔	12	The Trust continues to develop and deliver its Inclusion and Diversity Plan, along with its Workforce Strategy and the NHS People Plan. WRES, DES and gender pay gap data indicates positive direction of travel overall. Staff networks continue to be active, covering BAME, Disabilities and LGBT. Key appointments have been made at senior managerial level and Board (non-executive director) level.	No deviation from quarterly projection
	2d) Ability to embed strategies for excellence in leadership, management and organisational culture	12	12	12	12	12	↔	12	The Trust has continued to embed cross-organisation culture initiatives and use of cultural information to inform development work (e.g.: Say Yes to Respect, Just Culture, Freedom to Speak Up, Cultural Ambassadors). A new staff engagement tool (Simply Do Ideas) has been implemented and positively evaluated. The Trust Training Plan resumed following a COVID-19 hiatus. Leadership development programme has been refreshed ahead of a relaunch.	No deviation from quarterly projection

Areas of Strategic Risk		Apr 20	Projected Risk Exposure				Move ment	Q4 actual	Progress Notes	Deviations from projections
			Q1	Q2	Q3	Q4				
We achieve excellence in everything we do	3a) Capacity and capability to deliver and manage planned transformational changes	16	16	16	16	12	↔	16	The Trust's transformation programme is under review and linked to structural / organisation change. Capacity and capability to deliver individual transformation projects, and the overall transformation programme, is being assessed. Slippage due to COVID and other external constraints has occurred for some projects. Business planning for 2021/22 is progressing in the context of ongoing uncertainty around NHS financial arrangements.	Q4 deviation from quarterly projection
	3b) Ability to respond well to specific wider external challenges	16	16	16	16	12	↓	12	Trust recovery and future development is closely aligned with regional and national requirements via ICS. Business continuity arrangements have been reviewed and updated as part of the learning from the first wave of COVID. Assessment and mitigations are ongoing regarding the Trust's compliance arrangements for managing security threats. EU Exit is not creating significant supply chain issues for the Trust. Climate change risk assessment continues, with the development of sustainability plans.	No deviation from quarterly projection
We use resources wisely to invest in and sustain services	4a) Ability to robustly manage Trust finances to deliver the required financial performance	16	16	16	16	12	↔	16	The Trust continues to operate within, and comply with, temporary financial arrangements put in place system-wide during the pandemic response. Suspension of NHS contracting arrangements affected the Trust's expected advantageous financial position for 2020/21. Uncertainty remains regarding the system-wide financial arrangements for 2021/22 and the financial position of the Trust. Issue with internal control of financial management identified during the 2019/20 year-end process are being addressed.	Q4 deviation from quarterly projection
	4b) Ability to deliver our requirements and ambitions regarding key enabling infrastructure (digital technology, estates)	16	16	16	16	12	↔	16	Key digital transformation programmes (e.g. Unified Comms, N365) are experiencing delays due to a combination of COVID pressures and external third party issues. The COVID focus on supporting remote working, plus additional digital / ICT projects, are creating further demand pressures. Estates work has focussed on short-term remodelling of premises to create COVID-secure environments. The Trust faces medium-term strategic challenges regarding estate requirements.	Q4 deviation from quarterly projection

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Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
Exec Lead / Risk Area	Initial	Current	Target			External Assurance		
<p>1a) Ability to deliver and sustain the required performance standards and service developments in 999/A&E operations</p> <p>CQC Domains: Responsive</p> <p>TEG Lead:</p> <p>Exec Director: Operations</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p> <p>FINANCE AND INVESTMENT COMMITTEE</p>	4 x 5 = 20	4 x 4 = 16	4 x 4 = 16	<p>Risk 35: Hospital handover monitoring</p> <p>Risk 37: Paramedic workforce supply</p> <p>Risk 49: Calderdale-Huddersfield reconfiguration</p> <p>Risk 52: Friarage reconfiguration</p> <p>Risk 79: S136 hidden demand</p> <p>Risk 82: Impact of COVID on EOC and 999</p> <p>Risk 105: Operational Performance</p> <p>Risk 108: Communication of information between IUC and EOC</p> <p>Risk 180: A&E Operations staffing capacity</p> <p>Risk 99: Staff physical and mental well-being</p> <p>Risk 289: Trust hygiene and social distancing</p>	<p>Trust strategy</p> <p>Trust Clinical Strategy</p> <p>Trust Digital Strategy</p> <p>COVID response and recovery planning processes</p> <p>Business planning processes</p> <p>Trust policies and procedures</p> <p>Gate Review Process</p> <p>Transformation programme</p> <p>Programme / project boards</p> <p>IUEC Programme</p> <p>COVID debrief and lessons identified processes</p> <p>Regional system-wide plans and priorities</p> <p>National and sector-wide plans and priorities</p> <p>National policy developments</p> <p>System-wide planning and commissioning processes</p> <p>Stakeholder engagement plans and processes</p> <p>System-wide governance structures and processes</p> <p>Capital plan</p> <p>Business Continuity plans and processes</p> <p>Winter planning processes</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>COVID Command Cell</p> <p>2nd Line of Defence</p> <p>Transformation Programme Boards</p> <p>IUEC Programme Board</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Integrated Business Planning Group</p> <p>Gate Review Group</p> <p>Capital Planning Group</p> <p>Clinical Governance Group</p> <p>Incident Review Group</p> <p>Quality Assurance Working Group</p> <p>A&E Delivery Boards</p> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>Dispatch (20/21)</p> <p>Clinical Referral Pathways (20/21)</p> <p>Clinical Audit Assurance (19/20)</p> <p>Professional Revalidation (19/20)</p> <p>GRS (18/19)</p> <p>Attendance Management (18/19)</p> <p>External Assurance / Oversight</p> <p>System-wide boards (ICs, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>CQC Well-Led Framework</p> <p>External Audit</p>	<p>1) Impact of COVID activity on service performance</p> <p>2) Impact of COVID on demand patterns</p> <p>3) Impact of COVID on ways of working</p> <p>4) Provision of sufficient staffing levels in EOC and 999</p> <p>5) Service developments and change projects</p> <p>6) Control in wider system of impact of increased hospital handover time</p> <p>7) Mobilisation of key technologies to support delivery and monitoring of performance and clinical quality standards</p>	<p>1a) Monitor and mitigate impact of COVID activity on performance ED.Ops Ongoing to March 2021</p> <p>2a) Analyse and respond to new patterns of demand relating to COVID. ED.Ops Ongoing to March 2021</p> <p>2b) Mitigate combined impact on demand of winter pressures and COVID. ED.Ops October 2020 to March 2021</p> <p>3a) Monitor and mitigate the impact of COVID restrictions on job cycle time ED.Ops October 2020 to March 2021</p> <p>3b) Monitor and mitigate the impact of COVID social distancing arrangements in stations ED.Ops October 2020 to March 2021</p> <p>4a) Deliver recruitment, retention and training plans to maintain staffing levels. ED.Ops, ED.W&OD, Ongoing to March 2021</p> <p>4b) Manage impact on staffing levels of shielding, self-isolating or other COVID restrictions ED.W&OD, Ongoing to March 2021</p> <p>4c) Apply and maintain mitigations to reduce the likelihood and impact of a COVID outbreak in EOC or in stations ED.Ops, ED.QGPA, ED.F Ongoing to March 2021</p> <p>5a) Progress job cycle time project. ED.Ops March 2021</p> <p>5b) Team Based Working ED.Ops, March 2021</p> <p>5c) Integrated transport project ED.Ops, D.IUC, March 21</p> <p>6a) Continued focus on handover challenges incl. HALO – ED.Ops Ongoing to March 2021</p> <p>6b) Manage impact of new handover requirements arising from hot and cold sites and the mobilisation of Nightingale hospitals ED.Ops Ongoing to March 2021</p> <p>7a) ePR Phase 3 developments CIO. March 2021</p> <p>7b) Implement relevant elements of the Digital Strategy (e.g. Unified Comms, NAA CAD, ESMCP) CIO various delivery milestones during 2020/21</p>

1. Patients and communities experience fully joined-up care responsive to their needs								
Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
Exec Lead / Risk Area	Initial	Current	Target			External Assurance		
<p>1b) Ability to deliver the required performance standards and service developments in Integrated and Urgent Care</p> <p>CQC Domains: Responsive</p> <p>TEG Lead:</p> <p>Director of Integration and Urgent Care</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p> <p>FINANCE AND INVESTMENT COMMITTEE</p>	4 x 4 = 16	4 x 4 = 16	4 x 4 = 16	<p>Risk 54: Clinical Capacity in NHS111 / IUC</p> <p>Risk 58: Culture / Retention in NHS 111</p> <p>Risk 221: NHS111 homeworking solution</p> <p>Risk 222: Unified Comms impact on the NHS 111 First programme</p> <p>Risk 283: Excessive demand on NHS111 / IUC</p> <p>Risk 299: National mandate to validate 999 / ED online cases</p> <p>Risk 302: Social distancing space in Callflex</p> <p>Risk 305: Pulse oximetry rollout</p> <p>Risk 306: Directory of Services national changes</p> <p>Risk 182: IUC / NHS111 call handling time</p> <p>Risk 99: Staff physical and mental well-being</p> <p>Risk 289: Trust hygiene and social distancing</p>	<p>Trust strategy</p> <p>Trust Clinical Strategy</p> <p>Trust Digital Strategy</p> <p>COVID response and recovery planning processes</p> <p>Business planning processes</p> <p>Trust policies and procedures</p> <p>Gate Review Process</p> <p>Transformation programme</p> <p>Programme / project boards</p> <p>IUEC Programme</p> <p>COVID debrief and lessons identified processes</p> <p>Regional system-wide plans and priorities</p> <p>National and sector-wide plans and priorities</p> <p>National policy developments</p> <p>System-wide planning and commissioning processes</p> <p>Stakeholder engagement plans and processes</p> <p>System-wide governance structures and processes</p> <p>Capital plan</p> <p>Business Continuity plans and processes</p> <p>Winter planning processes</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>COVID Command Cell</p> <p>2nd Line of Defence</p> <p>Transformation Programme Boards</p> <p>IUEC Programme Board</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Integrated Business Planning Group</p> <p>Gate Review Group</p> <p>Capital Planning Group</p> <p>Clinical Governance Group</p> <p>Incident Review Group</p> <p>Quality Assurance Working Group</p> <p>A&E Delivery Boards</p> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>Clinical Referral Pathways (20/21)</p> <p>Clinical Audit Assurance (19/20)</p> <p>Professional Revalidation (19/20)</p> <p>External Assurance / Oversight</p> <p>System-wide boards (ICSs, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>CQC Well-Led Framework</p> <p>External Audit</p>	<p>1) Impact of COVID activity on service performance</p> <p>2) Impact of COVID on demand patterns</p> <p>3) Impact of COVID on ways of working</p> <p>4) Provision of sufficient staffing levels</p> <p>5) Service developments and change projects</p> <p>6) Mobilisation of key technologies to support delivery and monitoring of performance and clinical quality standards</p>	<p>1a) Monitor and mitigate the impact of COVID activity on performance D.IUC Ongoing to March 2021</p> <p>2a) Analyse and respond to new patterns of demand relating to COVID D.IUC Ongoing to March 2021</p> <p>2b) Mitigate combined impact on demand of winter pressures and COVID D.IUC October to March 2021</p> <p>3a) Mitigate the impact of COVID restrictions in NHS111 call centres: social distancing, shift patterns D.IUC October to March 2021</p> <p>3b) Develop capacity and capability for greater remote / home working amongst NHS111 staff groups D.IUC October to March 2021</p> <p>4a) Deliver recruitment, training and retention plans to maintain staffing levels D.IUC, ED.W&OD, Ongoing to March 2021</p> <p>4b) Clinical staff recruitment and retention developments D.IUC, ED.W&OD, Ongoing to March 2021</p> <p>4c) Manage impact on staffing levels of shielding, self-isolating or other COVID restrictions ED.W&OD, Ongoing to March 2021</p> <p>4d) Implement mitigations to reduce the likelihood and impact of a COVID outbreak in NHS 111 call handling centres D.IUC, ED.QGPA, ED.F Ongoing to March 2021</p> <p>5a) Progress 111 First D.IUC December 2020</p> <p>5b) Plan and deliver the integrated CAS model D.IUC tbc</p> <p>5c) Plan and deliver the wider IUEC transformation programme D.IUC to programme plan timescales</p> <p>5d) Respond to national review of IUC provision D.IUC March 2021</p> <p>6a) Implement relevant elements of Digital Strategy (e.g. Unified Comms) CIO, various delivery milestones during 2020/21</p>

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Exec Lead / Risk Area	Initial	Current	Target			External Assurance		
<p>1c) Ability to deliver the required performance standards and service developments in the Patient Transport Service</p> <p>CQC Domains:</p> <p>All</p> <p>TEG Lead:</p> <p>Director of Integration and Urgent Care</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p> <p>FINANCE AND INVESTMENT COMMITTEE</p>	4 x 4 = 16	4 x 3 = 12	4 x 3 = 12	<p>Risk 107: Community First Responders support for PTS</p> <p>Risk 294: Reduction in Outpatient PTS capacity to support A&E operations</p> <p>Risk 99: Staff physical and mental well-being</p> <p>Risk 289: Trust hygiene and social distancing</p>	<p>Trust strategy</p> <p>Trust Fleet Strategy</p> <p>COVID response and recovery planning processes</p> <p>Business planning processes</p> <p>Trust policies and procedures</p> <p>Gate Review Process</p> <p>Transformation programme</p> <p>Programme / project boards</p> <p>IUEC Programme</p> <p>COVID debrief and lessons identified processes</p> <p>Regional system-wide plans and priorities</p> <p>National and sector-wide plans and priorities</p> <p>National policy developments</p> <p>System-wide planning and commissioning processes</p> <p>Stakeholder engagement plans and processes</p> <p>System-wide governance structures and processes</p> <p>Capital plan</p> <p>PTS contracting processes</p> <p>Procurement processes</p> <p>Business Continuity plans and processes</p> <p>Winter planning processes</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <hr/> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>COVID Command Cell</p> <hr/> <p>2nd Line of Defence</p> <p>Transformation Programme Boards</p> <p>IUEC Programme Board</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Integrated Business Planning Group</p> <p>Gate Review Group</p> <p>Capital Planning Group</p> <p>Clinical Governance Group</p> <p>PTS Governance Group</p> <p>Quality Assurance Working Group</p> <p>Incident Review Group</p> <p>A&E Delivery Boards</p> <hr/> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>PTS Third Party Providers (18/19)</p> <hr/> <p>External Assurance / Oversight</p> <p>System-wide boards (ICSS, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>CQC Well-Led Framework</p> <p>External Audit</p>	<p>1) Impact of COVID activity on service performance</p> <p>2) Impact of COVID on demand patterns. (Acute demand and changes planned and reactive care). WYATT and Planned Care Alliance Board</p> <p>3) Impact of COVID on ways of working</p>	<p>1a) Monitor and mitigate the impact of COVID activity on performance D.IUC Ongoing to March 2021</p> <p>2a) Analyse (model, forecast, map) and respond to new patterns of demand relating to COVID D.IUC Ongoing to March 2021</p> <p>2b) Mitigate combined impact on demand of winter pressures and COVID D.IUC October to March 2021</p> <p>2c) Identify and mitigate the impact of hospital activity levels regarding planned care D.IUC Ongoing to March 2021</p> <p>3a) Mitigate the impact of social distancing requirements in PTS vehicles D.IUC Ongoing to March 2021</p> <p>3b) Mitigate the impact of IPC / cleaning requirements in PTS vehicles D.IUC Ongoing to March 2021</p> <p>3c) Monitor and respond to impact on PTS of increases in on-day discharges D.IUC Ongoing to March 2021</p> <p>3d) Manage the impact of PTS support for A&E services during peak periods D.IUC Ongoing to March 2021</p> <p>3e) Expand the use of homeworking in PTS D.IUC Ongoing to March 2021</p> <p>3f) Develop potential options for introducing cohorting for PTS D.IUC March 2021</p> <p>3g) Develop proposals for returning from high-cost single patient occupancy to a more financially sustainable operating model D.IUC March 2021</p>

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Exec Lead / Risk Area	Initial	Current	Target			External Assurance		
<p>1c) [Continued] Ability to deliver the required performance standards and service developments in the Patient Transport Service</p> <p>CQC Domains:</p> <p>All</p> <p>TEG Lead:</p> <p>Director of Integration and Urgent Care</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p> <p>FINANCE AND INVESTMENT COMMITTEE</p>	4 x 4 = 16	4 x 3 = 12	4 x 3 = 12	<p>Risk 107: Community First Responders support for PTS</p> <p>Risk 294: Reduction in Outpatient PTS capacity to support A&E operations</p> <p>Risk 99: Staff physical and mental well-being</p> <p>Risk 289: Trust hygiene and social distancing</p>	<p>Trust strategy</p> <p>Trust Fleet Strategy</p> <p>COVID response and recovery planning processes</p> <p>Business planning processes</p> <p>Trust policies and procedures</p> <p>Gate Review Process</p> <p>Transformation programme</p> <p>Programme / project boards</p> <p>IUEC Programme</p> <p>COVID debrief and lessons identified processes</p> <p>Regional system-wide plans and priorities</p> <p>National and sector-wide plans and priorities</p> <p>National policy developments</p> <p>System-wide planning and commissioning processes</p> <p>Stakeholder engagement plans and processes</p> <p>System-wide governance structures and processes</p> <p>Capital plan</p> <p>PTS contracting processes</p> <p>Procurement processes</p> <p>Business Continuity plans and processes</p> <p>Winter planning processes</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>COVID Command Cell</p> <p>2nd Line of Defence</p> <p>Transformation Programme Boards</p> <p>IUEC Programme Board</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Integrated Business Planning Group</p> <p>Gate Review Group</p> <p>Capital Planning Group</p> <p>Clinical Governance Group</p> <p>PTS Governance Group</p> <p>Quality Assurance Working Group</p> <p>Incident Review Group</p> <p>A&E Delivery Boards</p> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>PTS Third Party Providers (18/19)</p> <p>External Assurance / Oversight</p> <p>System-wide boards (ICs, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>CQC Well-Led Framework</p> <p>External Audit</p>	<p>4) Provision of sufficient staffing levels</p> <p>5) Service developments and change projects</p>	<p>4a) Deliver recruitment, training and retention plans to maintain staffing levels, including PTS volunteers and use of CFRs D.IUC, ED.W&OD, Ongoing to March 2021</p> <p>4b) Provide training and equipment to support expanded number of PTS volunteers D.IUC Ongoing to March 2021</p> <p>4c) Manage impact on staffing levels of shielding, self-isolating or other COVID restrictions ED.W&OD, Ongoing to March 2021</p> <p>4d) Implement mitigations (including homeworking) to reduce the likelihood and impact of a COVID outbreak in PTS call handling centres or in stations or vehicles D.IUC, ED.QGPA, ED.F Ongoing to March 2021</p> <p>5a) Planning for PTS contract renewals, extensions and procurements (North Yorkshire, South Yorkshire) D.IUC Ongoing to March 2021</p> <p>5b) Implement integrated transport project ED.Ops, D.IUC, 2020</p> <p>5c) Mobilise new vehicles as part of fleet strategy (with links to greener / electric fleet) D.IUC, ED.F, March 2021</p> <p>5d) Represent, input and take a lead role in the national review of patient transport services D.IUC March 2021</p> <p>5e) Development of PTS recognised qualification, linked to YAS workforce plan D.IUC March 2021</p>

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Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
Exec Lead / Risk Area	Initial	Current	Target			External Assurance		
<p>1d) Ability to influence and respond to system-wide developments in urgent and emergency care</p> <p>CQC Domains:</p> <p>Well Led</p> <p>TEG Leads:</p> <p>Director of Integration and Urgent Care</p> <p>Exec Director of Operations</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p> <p>FINANCE AND INVESTMENT COMMITTEE</p>	4 x 3 = 12	4 x 3 = 12	4 x 3 = 12	<p>Risk 49: System Reconfiguration (Calderdale)</p> <p>Risk 52: System Reconfiguration (Friarage)</p> <p>Risk 54: Clinical Capacity in NHS111 / IUC</p> <p>Risk 58: Culture / Retention in NHS 111</p> <p>Risk 221: NHS 111 homeworking solution</p> <p>Risk 222: Unified Comms impact on the NHS 111 First programme</p> <p>Risk 283: Excessive demand on NHS111 / IUC</p> <p>Risk 299: National mandate to validate 999 / ED online cases</p> <p>Risk 305: Pulse oximetry rollout</p> <p>Risk 306: Directory of Services national changes</p> <p>Risk 182: IUC / NHS111 call handling time</p>	<p>Trust strategy</p> <p>COVID response and recovery planning processes</p> <p>Business planning processes</p> <p>Trust policies and procedures</p> <p>Gate Review Process</p> <p>Transformation programme</p> <p>Programme / project boards</p> <p>IUEC Programme</p> <p>COVID debrief and lessons identified processes</p> <p>Regional system-wide plans and priorities</p> <p>National and sector-wide plans and priorities</p> <p>National policy developments</p> <p>System-wide planning and commissioning processes</p> <p>Stakeholder engagement plans and processes</p> <p>System-wide governance structures and processes</p> <p>Capital plan</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG,TMG</p> <p>Integrated Performance Report</p> <p>COVID Command Cell</p> <p>2nd Line of Defence</p> <p>Transformation Programme Boards</p> <p>IUEC Programme Board</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Integrated Business Planning Group</p> <p>Gate Review Group</p> <p>Capital Planning Group</p> <p>Clinical Governance Group</p> <p>Quality Assurance Working Group</p> <p>A&E Delivery Boards</p> <p>Reconfiguration Group</p> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>External Assurance / Oversight</p> <p>System-wide boards (ICSs, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>CQC Well-Led Framework</p> <p>External Audit</p>	<p>1. Complexity and fluidity in system wide plans and emerging developments in emergency and urgent care</p> <p>2. Clarity and coherence in system wide COVID-19 recovery plans</p> <p>3) National and local external funding pressures</p>	<p>1a) Work with commissioners and providers to maintain a coherent region-wide strategy and collaborative approach to system management D.IUC, ED.Ops, AD.CA ongoing</p> <p>1b) Maintain oversight of partnerships with other organisations, including STPs and A&E Delivery Boards D.IUC, ED.Ops, AD.CA ongoing</p> <p>1c) Identify and mitigate risks (e.g. safety, quality, performance) arising from developments in care pathways and service reconfigurations D.IUC, ED.Ops ongoing</p> <p>1d) Influence system approach to specific areas of provision, including mental health and ageing well D.IUC, AD.CA ongoing</p> <p>1e) Engage with system partners in delivering the IUEC programme D.IUC ongoing, various delivery milestones</p> <p>1f) Work with commissioners and other providers to take forward implementation of the mental health ambulance service development plan D.IUC ongoing</p> <p>2a) Influence system approaches to COVID-19 response activity ED.Ops, EMD, D.IUC ongoing</p> <p>2b) Influence system approaches to COVID-19 recovery activity ED.Ops, EMD, D.IUC ongoing</p> <p>3a) Influence planning arrangements and resource allocations channelled through system partnership structures (e.g. COVID funding via West Yorkshire STP) ED.F ongoing</p> <p>3b) Develop and implement efficiency work programmes across the Trust, local partners and the wider NAA. CEO ongoing</p>

2. Our people feel empowered, valued and engaged to perform at their best

Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
	Exec Lead / Risk Area	Initial	Current			Target		
<p>2a) Ability to ensure provision of sufficient clinical workforce</p> <p>CQC domains:</p> <p>Well Led</p> <p>TEG Lead:</p> <p>Director of Workforce and OD</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p>	4 x 4 = 16	4 x 4 = 16	4 x 4 = 16	<p>Risk 37: Paramedic Workforce Supply</p> <p>Risk 54: Clinical Capacity in NHS111 / IUC</p> <p>Risk 58: Culture and retention in NHS111</p> <p>Risk 99: Staff physical and mental well-being</p> <p>Risk 180: A&E Operations staffing capacity</p>	<p>Portfolio Governance Boards</p> <p>Living Our Values Programme</p> <p>Trust Workforce Strategy</p> <p>Trust Vision and Values</p> <p>Trust policies and procedures</p> <p>NHS People Plan</p> <p>Freedom to Speak Up process</p> <p>Direct Executive and senior management engagement</p> <p>Leadership conferences</p> <p>Clinical Supervision structure</p> <p>Staff-side engagement</p> <p>Diversity and Inclusion Strategy and processes</p> <p>Staff Networks</p> <p>Cultural Ambassadors</p> <p>Say Yes to Respect</p> <p>Just Culture processes</p> <p>Simply Do Ideas process</p> <p>Accountability Framework</p> <p>Leadership in Action Programme</p> <p>YAS Training Plan</p> <p>Statutory and Mandatory Training</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>YAS Academy</p> <p>COVID Strategic Command</p> <p>2nd Line of Defence</p> <p>Transformation Programme Boards</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Strategic Workforce Group</p> <p>Clinical Portfolio Governance Boards</p> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>Occupational Health (20/21)</p> <p>Professional Revalidation (19/20)</p> <p>Attendance Management (18/19)</p> <p>External Assurance / Oversight</p> <p>System-wide boards (ICSs, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>Annual NHS Staff Survey</p> <p>CQC Well Led Framework</p> <p>External Audit</p>	<p>1) National shortage of Paramedics impacting on recruitment and retention. Competition from non-ambulance sector</p> <p>2) Availability of clinical workforce for IUEC / 111 First</p> <p>3) Impact of COVID on availability of clinical workforce</p>	<p>1a) Deliver paramedic recruitment trajectory ED.W&OD, ED.Ops, March 2021</p> <p>1b) Develop and deliver effective strategies for clinical retention ED.W&OD, ED.Ops, EMD, March 2021</p> <p>1c) Deliver 2020/21 Trust training plan ED.W&OD March 2021</p> <p>1d) Continue to develop the paramedic career pathway ED.W&OD March 2021</p> <p>1e) Engage with the development of models for rotational paramedics ED.W&OD March 2021</p> <p>1f) Develop proposals for international recruitment ED.W&OD Sept 2020</p> <p>1g) Utilise the apprenticeship model ED.W&OD ongoing</p> <p>1h) Develop proposal for future training model ED.W&OD Sept 2021</p> <p>2a) Clinical staff recruitment and retention ED.W&OD, D.IUC ongoing to March 2021</p> <p>2b) Additional clinical workforce to support expansion of NHS 111 / IUEC provision ED.W&OD, D.IUC December to March 2021</p> <p>3a) Implement mitigations to reduce the likelihood and impact of a COVID outbreak in call handling centres ED.Ops, D.IUC, ED.QGPA, ED.F Ongoing to March 2021</p> <p>3b) Deliver specific strategies to recruit additional clinical capacity to support periods of temporary high-demand (COVID waves) ED.W&OD October to March 2021</p> <p>3c) Manage impact on staffing levels of shielding, self-isolating or other COVID restrictions ED.W&OD, Ongoing to March 2021</p>

2. Our people feel empowered, valued and engaged to perform at their best								
Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
Exec Lead / Risk Area	Initial	Current	Target			External Assurance		
<p>2b) Ability to support the physical and mental health and well-being of staff</p> <p>CQC domains:</p> <p>Well Led</p> <p>TEG Lead:</p> <p>Director of Workforce and OD</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p>	4 x 4 = 16	4 x 3 = 12	4 x 3 = 12	<p>Risk 17: Handover of critical information</p> <p>Risk 21: Conflict resolution training</p> <p>Risk 42: Violence and aggression</p> <p>Risk 45: Subject matter expert for manual handling</p> <p>Risk 50: Immunity screening, vaccination and health surveillance</p> <p>Risk 58: Culture and retention in NHS111</p> <p>Risk 99: Staff physical and mental well-being</p> <p>Risk 187: Cumulative effect of repeated moving and handling</p> <p>Risk 188: Health and Safety training for middle managers</p> <p>Risk 289: Trust hygiene and social distancing</p> <p>Risk 324: COVID-19 staff vaccinations uptake</p>	<p>Portfolio Governance Boards</p> <p>Trust Workforce Strategy</p> <p>Trust Vision and Values</p> <p>Trust policies and procedures</p> <p>HR Business Partners</p> <p>NHS People Plan</p> <p>Freedom to Speak Up process</p> <p>Direct Executive and senior management engagement</p> <p>Leadership conferences</p> <p>Clinical Supervision structure</p> <p>Staff-side engagement</p> <p>Diversity and Inclusion Strategy and processes</p> <p>Staff Networks</p> <p>Cultural Ambassadors</p> <p>Say Yes to Respect</p> <p>Just Culture processes</p> <p>Simply Do Ideas process</p> <p>Accountability Framework</p> <p>Leadership in Action Programme</p> <p>YAS Training Plan</p> <p>Statutory and Mandatory Training</p> <p>Staff Well Being support offer and processes</p> <p>Occupational health processes and procedures</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <hr/> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>COVID Strategic Command</p> <p>Staff Well-Being Group</p> <hr/> <p>2nd Line of Defence</p> <p>Transformation Programme Boards</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Strategic Workforce Group</p> <p>Strategic Health & Safety Committee</p> <p>Diversity and Inclusion Group</p> <p>Leadership and Management Portfolio Governance Boards</p> <p>Inspections for Improvement Process</p> <hr/> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>Occupational Health (20/21)</p> <p>Violence and Aggression (20/21)</p> <p>Fire Safety / Health and Safety (19/20)</p> <p>Attendance Management (19/20)</p> <p>Serious Untoward Incidents (18/19)</p> <p>Temporary Injury Allowance (18/19)</p> <hr/> <p>External Assurance / Oversight</p> <p>System-wide boards (ICSs, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>Annual NHS Staff Survey</p> <p>CQC Well Led Framework</p> <p>External Audit</p>	<p>1. Impact of COVID on the physical and mental health and well-being of staff</p> <p>2) Embed initiatives to support staff wellbeing</p> <p>3) Management of short and long term sickness absence</p> <p>4) Occupational Health contract arrangements</p>	<p>1a) Deliver and embed health and well-being interventions for all staff groups ED.WFOD April 2020 and ongoing</p> <p>1b) Identify and mitigate COVID-related health and well-being risk for specific targeted groups ED.WFOD April 2020 and ongoing</p> <p>1c) Implement mitigations to reduce the likelihood and impact of a COVID outbreak amongst staff / in the workplace: asymptomatic testing, internal test and trace, outbreak management, investment in social distancing and IPC measures ED.Ops, D.IUC, ED.QGPA, ED.F Ongoing to March 2021</p> <p>1d) Deliver guidance to support physical and mental well-being of homeworkers ED.WFOD April 2020 and ongoing</p> <p>1e) Deliver enhanced Post-Incident Care provision ED.WFOD April 2020 and ongoing</p> <p>1f) Deliver COVID vaccinations to staff groups in line with national scheme, ED.WFOD commence Jan 2021</p> <p>2a) Re-commence Leadership in Action Module 5 on leadership for staff well-being ED.WFOD January 2021</p> <p>2b) Embed mental health focus ED.WFOD ongoing</p> <p>2c) Deliver interventions for prevention of violence and aggression towards staff ED.QGPA ongoing</p> <p>2d) Deliver initiatives for MSK issues, including moving and handling training ED.QGPA ongoing</p> <p>2e) Deliver Flu Campaign resulting in increased uptake of flu vaccination ED.WFOD commence September 2020</p> <p>3a) Focus on supportive management of short and long term sickness: general ED.WFOD ongoing</p> <p>3b) Focus on supportive management of short and long term sickness: COVID-related ED.WFOD ongoing</p> <p>4) Monitor Occupational Health contract to deliver effective provision for staff. ED.WFOD ongoing</p>

2. Our people feel empowered, valued and engaged to perform at their best

Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
	Exec Lead / Risk Area	Initial	Current			Target		
2c) Ability to embed strategies to meet statutory and regulatory requirements and the Trust's own ambitions relating to diversity and inclusion CQC domains: Well Led TEG Lead: Director of Workforce and OD COMMITTEE ASSURANCE: QUALITY COMMITTEE	4 x 4 = 16	4 x 3 = 12	4 x 3 = 12	Risk 47: Trust Board representation Risk 58: Culture and retention in NHS111 Risk 99: Staff physical and mental well-being	Portfolio Governance Boards Trust Workforce Strategy Trust Vision and Values Trust policies and procedures HR Business Partners NHS People Plan Freedom to Speak Up process Direct Executive and senior management engagement Leadership conferences Clinical Supervision structure Staff-side engagement Diversity and Inclusion Strategy and processes Staff Networks Cultural Ambassadors Say Yes to Respect Just Culture processes Simply Do Ideas process Accountability Framework Leadership in Action Programme YAS Training Plan Statutory and Mandatory Training WRES and DES monitoring and reporting Gender Pay Gap monitoring and reporting Professional standards Regulatory frameworks	Board Level Assurance / Oversight Trust Board Board Committees Audit Committee	1) Diversity and inclusion plans and activities 2) Impact of COVID on specific groups (e.g. BAME) 3) Diversity in the workforce is not reflective of wider population 4) Board level representation not reflective of wider population	1a) Continue to embed Vision and Values and Behaviours frameworks. ED.WFOD April 2020 and ongoing 1b) Continue to embed delivery of the People Strategy ED.WFOD April 2020 and ongoing 1c) Continue to embed specific initiatives (e.g.) Say Yes to Respect ED.WFOD April 2020 and ongoing 1d) Further develop the work of the Staff Networks ED.WFOD April 2020 and ongoing 2a) Identify, assess and mitigate COVID-related health and well-being risk for specific targeted groups ED.WFOD April 2020 and ongoing 3a) Continue to deliver Diversity and Inclusion Strategy ED.WFOD ongoing 3b) Continue to embed equality monitoring arrangements ED.WFOD ongoing 3c) Monitoring and interventions relating to WRES and DES data ED.WFOD ongoing 3d) Monitoring and interventions relating to gender pay ED.WFOD ongoing 4a) Establish and make appointment to a new Non-Executive Director position AD.CA, ED.WFOD March 2021
						1st Line of Defence Directorate Management Groups Trust management bodies: TEG, TMG Integrated Performance Report Staff Network Initiatives Joint Steering Group Policy Development Group Accountability Framework Programme YAS Academy		

2. Our people feel empowered, valued and engaged to perform at their best								
Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
Exec Lead / Risk Area	Initial	Current	Target			External Assurance		
<p>2d) Ability to embed strategies for excellence in leadership, management and positive organisational culture</p> <p>CQC domains:</p> <p>Well Led</p> <p>TEG Lead:</p> <p>Director of Workforce and OD</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p>	4 x 3 = 12	4 x 3 = 12	4 x 3 = 12	<p>Risk 44: Clinical Supervisor job evaluation</p> <p>Risk 47: Trust Board representation</p> <p>Risk 54: Clinical Capacity in NHS111 / IUC</p> <p>Risk 58: Culture and retention in NHS111</p> <p>Risk 188: Health and Safety training for middle managers</p> <p>Risk 99: Staff physical and mental well-being</p>	<p>Portfolio Governance Boards</p> <p>Trust Workforce Strategy</p> <p>Trust Vision and Values</p> <p>Trust policies and procedures</p> <p>HR Business Partners</p> <p>NHS People Plan</p> <p>Freedom to Speak Up process</p> <p>Direct Executive and senior management engagement</p> <p>Leadership conferences</p> <p>Clinical Supervision structure</p> <p>Staff-side engagement</p> <p>Diversity and Inclusion Strategy and processes</p> <p>Staff Networks</p> <p>Cultural Ambassadors</p> <p>Say Yes to Respect</p> <p>Just Culture processes</p> <p>Simply Do Ideas process</p> <p>Accountability Framework</p> <p>Leadership in Action Programme</p> <p>YAS Training Plan</p> <p>Statutory and Mandatory Training</p> <p>WRES and DES monitoring and reporting</p> <p>Gender Pay Gap monitoring and reporting</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>Staff Network Initiatives</p> <p>Joint Steering Group</p> <p>Policy Development Group</p> <p>Accountability Framework Programme</p> <p>YAS Academy</p> <p>2nd Line of Defence</p> <p>Transformation Programme Boards</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Strategic Workforce Group</p> <p>Diversity and Inclusion Group</p> <p>Leadership and Management Portfolio</p> <p>Governance Boards</p> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>Freedom to Speak Up (19/20)</p> <p>Statutory and Mandatory Training Data and KPIs (19/20)</p> <p>External Assurance / Oversight</p> <p>System-wide boards (ICs, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>Annual NHS Staff Survey</p> <p>CQC Well Led Framework</p> <p>External Audit</p>	<p>1) Matured leadership and accountability</p> <p>2) Management development</p> <p>3) Engagement with widely dispersed workforce and significant pace of change, exacerbated by COVID response and re-set (e.g. homeworking)</p> <p>4) Capacity and change at Executive and non-Executive level</p>	<p>1a) Continue to deliver and embed Vision and Values and Behaviours framework at all levels, including at Executive and non-Executive level. ED.WFOD ongoing</p> <p>1b) Continue to embed delivery of the People Strategy ED.WFOD ongoing</p> <p>1c) Continue to deliver leadership and management elements of the Accountability Framework ED.WFOD ongoing</p> <p>2a) Continue to develop the Talent Management model ED.WFOD ongoing</p> <p>2b) Commence delivery of refreshed Leadership in Action programme ED.WFOD January 2021</p> <p>2c) Commence the Accelerated Leadership Programme ED.WFOD ongoing</p> <p>3a) Deliver staff engagement opportunities as part of COVID-19 recovery and re-set ED.WFOD ongoing</p> <p>3b) Embed cross-organisation culture initiatives and use of cultural information to inform development work (e.g.: Say Yes to Respect, Just Culture, Freedom to Speak Up, Cultural Ambassadors) ED.WFOD, ED.QGPA ongoing</p> <p>3c) Further develop the Staff Networks ED.WFOD ongoing</p> <p>4a) Ensure appropriate capacity, capability and role clarity in Executive and Non-Executive positions CEO, AD.CA, ED.WFOD, ongoing</p> <p>4b) Deliver targeted Board Development opportunities, including induction programme for new Board members CEO, AD.CA, ED.WFOD, Board sessions throughout the year</p>

3. We achieve excellence in everything we do

Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
	Exec Lead / Risk Area	Initial	Current			Target		
<p>3a) Capacity and capability to deliver and manage planned transformational changes and Trust strategy</p> <p>CQC Domains: All</p> <p>TEG Lead(s):</p> <p>Executive Director of Quality, Governance and Performance Assurance</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p> <p>FINANCE AND INVESTMENT COMMITTEE</p>	4 x 4 = 16	4 x 4 = 16	4 x 3 = 12	<p>Risk 103: COVID impact on governance and compliance</p>	<p>Trust strategy</p> <p>Trust COVID response and recovery planning processes</p> <p>Business planning processes</p> <p>Trust policies and procedures</p> <p>Gate Review Process</p> <p>Transformation programme</p> <p>Programme / project boards</p> <p>Business continuity plans and processes</p> <p>COVID debrief and lessons identified processes</p> <p>Regional system-wide plans and priorities</p> <p>National and sector-wide plans and priorities</p> <p>QI Strategy</p> <p>Performance Management Framework</p> <p>Data Management Framework</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <hr/> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>COVID Recovery Cell</p> <hr/> <p>2nd Line of Defence</p> <p>Integrated Business Planning Group</p> <p>Transformation Programme Boards</p> <p>PMO programme assurance</p> <p>Risk and Assurance Group</p> <p>Directorate budget reviews (Finance Business Partners)</p> <p>Gate Review Group</p> <hr/> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>Performance Management and KPIs (20/21, 19/20)</p> <p>Data Quality and KPIs (18/19)</p> <p>Risk Management (20/21, 19/20, 18/19)</p> <p>Board Assurance Framework (20/21, 19/20, 18/19)</p> <p>Business Case Management (18/19)</p> <p>Policy Management (18/19)</p> <hr/> <p>External Assurance / Oversight</p> <p>System-wide boards (ICSs, NAA, QGARD etc)</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>CQC Well Led Framework</p> <p>Business Insights Review (PwC)</p> <p>External Audit</p>	<p>1. Impact of COVID interim financial measures on ability to invest in transformation work</p> <p>2) Embedded approach to planning and delivering transformation, developments and change</p> <p>3) Impact of COVID on delivery of Quality Improvement strategy</p> <p>4) MI, analytics and reporting</p>	<p>1a) Assess and mitigate the impact of COVID financial management arrangements on the availability of investment and transformation budgets ED.F September 2020</p> <p>1b) Assess and mitigate the impact of COVID financial management regulations on the Trust's freedom to invest in transformation developments. ED.F September 2020</p> <p>2a) Re-set Trust transformation programme around key themes: (e.g. IUEC and future organisation) ED.QGPA December 2020</p> <p>2b) Review and refresh programme and project management assurance (PMO) arrangements ED.QGPA October 2020</p> <p>2c) Continue to develop and embed the Gate Review process to control and assure investment business cases AD.CA ongoing</p> <p>2d) Review and re-set Trust strategy and business plan priorities to ensure they remain relevant, affordable and deliverable AD.CA October 2020</p> <p>2e) Ensure the Trust has capacity and capability to deliver business change and transformation CEO, ED.QGPA ongoing</p> <p>3a) Re-set QI delivery to align with COVID related needs and developments (QI Fellows, RPIWs) ED.QGPA ongoing</p> <p>3b) Continue to embed organisation-wide approach to Quality Improvement, ED.QGPA ongoing</p> <p>4a) Deliver next phase enhancement of the Integrated Performance Report CIO November 2020</p>

3. We achieve excellence in everything we do

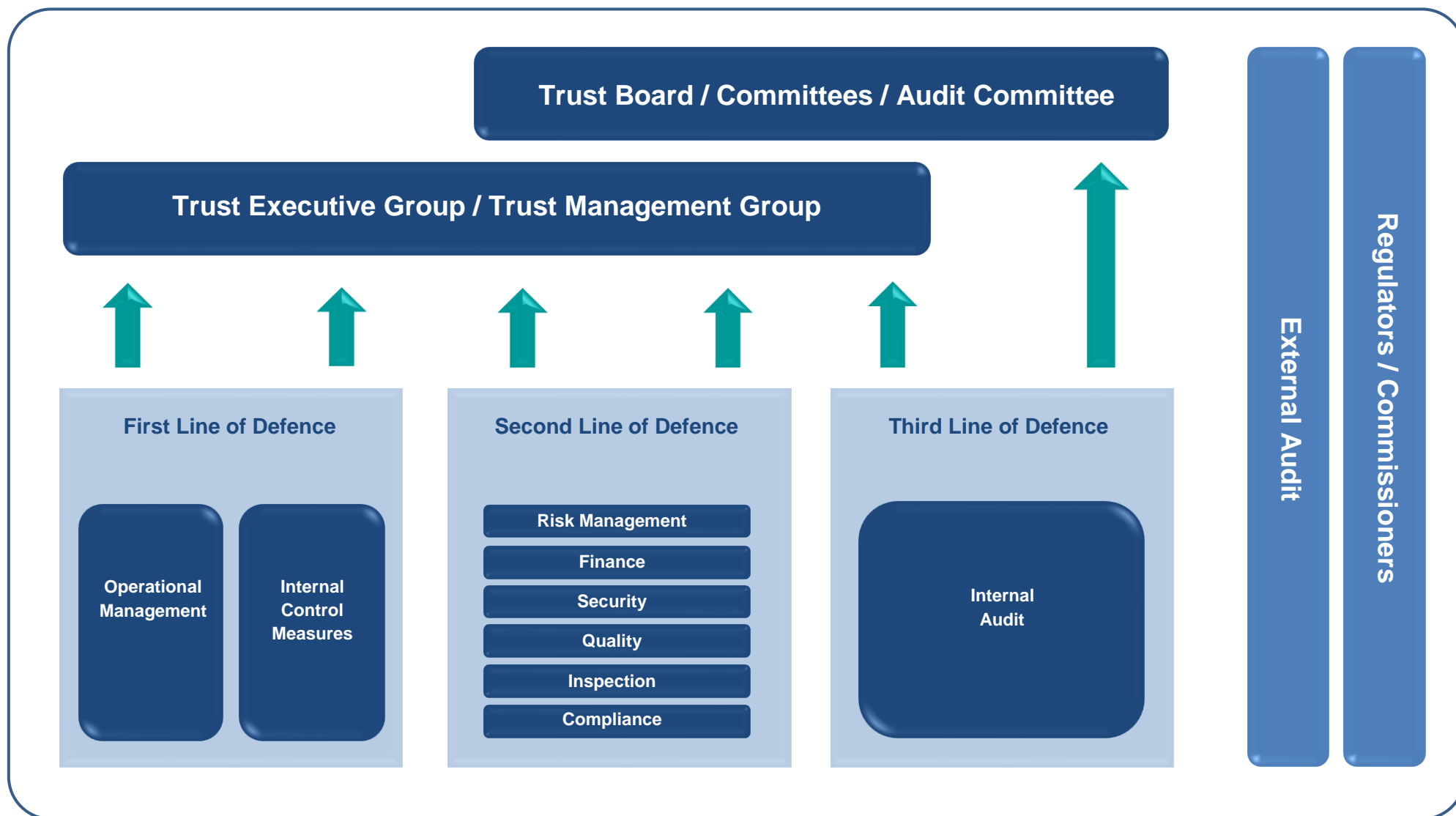
Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
	Exec Lead / Risk Area	Initial	Current			Target		
3b) Ability to respond well to specific wider external challenges CQC Domains: All TEG Lead: Assistant Director Corporate Affairs Executive Director of Operations COMMITTEE ASSURANCE: QUALITY COMMITTEE FINANCE AND INVESTMENT COMMITTEE	4 x 4 = 16	4 x 3 = 12	4 x 3 = 12	Risk 9: EU Exit Risk 49: Huddersfield-Calderdale Reconfiguration Risk 52: Friarage Reconfiguration Risk 62: Climate change Risk 103: COVID impact on governance and compliance Risk 288: National Security Risk Assessment	Trust strategy Trust COVID response and recovery planning processes Business planning processes Trust policies and procedures Gate Review Process Transformation programme Programme / project boards Business continuity plans and processes COVID debrief and lessons identified processes Regional system-wide plans and priorities National and sector-wide plans and priorities EU Exit planning risk assessment and plans Climate change risk assessment and plans National security risk assessment processes and risk register Professional standards Regulatory frameworks	Board Level Assurance / Oversight Trust Board Board Committees Audit Committee	1. Alignment of Trust recovery and re-set activity and organisational structure with local and national systems 2. Business continuity planning, incident management and EPRR 3. Impact of EU Exit 4. Impact of Climate Change	1a) Ensure alignment of Trust recovery and re-set plans with local system partners and national priorities CEO, AD.CA ongoing 1b) Review and re-set Trust business plan priorities to ensure they remain relevant, affordable and deliverable AD.CA October 2020 1c) Develop options for the future form of the organisation to support alignment with the wider system CEO, AD.CA March 2021 2a) Capture learning from wave one debriefs to inform future approaches to incident management ED.Ops October 2020 2b) Review and update Trust business continuity plans ED.Ops March 2021 2c) Ensure alignment with the national risk assessment processes and the national risk register ED.Ops March 2021 2d) Maintain Trust interface with the wider system through Gold and Silver resilience arrangements and LRFs ED.Ops March 2021 2e) Ensure corporate support services are managed and agile in ways that support frontline delivery in periods of peak demand ED.Ops 3a) Re-convene EU Exit Co-ordination Planning Group ED.Ops September 2021 3b) Review and refresh risk assessment and actions plans relating to impact of EU Exit ED.Ops October 2021 4a) Adopt and commence delivery of an approved Sustainable Development Management Plan ED.F December 2020 4b) Deliver climate change risk mitigations: adaptation plan, flood risk assessment; supply chain assessment. ED.F December 2020
						1st Line of Defence Directorate Management Groups Trust management bodies: TEG, TMG Integrated Performance Report COVID Recovery Cell COVID Strategic Command EU Exit Planning Group		

4. We use resources wisely to invest in and sustain services

Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
	Exec Lead / Risk Area	Initial	Current			Target		
<p>4a) Ability to robustly manage Trust finances to deliver the required financial performance</p> <p>CQC domains:</p> <p>Effective, Responsive Well-Led</p> <p>TEG Lead:</p> <p>Executive Director of Finance</p> <p>COMMITTEE ASSURANCE:</p> <p>FINANCE AND INVESTMENT COMMITTEE</p> <p>AUDIT COMMITTEE COMMITTEE</p>	4 x 4 = 16	4 x 4 = 16	4 x 3 = 12	<p>Finance Risks</p> <p>Risk 13: CIP implementation</p> <p>Risk 89: Counter fraud, bribery and corruption</p>	<p>Monthly review by TMG / TEG via IPR and Finance report</p> <p>Trust policies and procedures</p> <p>Trust SFIs and Scheme of Delegation</p> <p>Trust Board oversight and review</p> <p>F&I committee review</p> <p>Audit Committee</p> <p>CIPMG monitoring</p> <p>Finance Business Partners</p> <p>Business Planning Process</p> <p>Gate Review Process</p> <p>Capital Monitoring Process</p> <p>Internal Audit reviews</p> <p>External Audit reviews</p> <p>Delivery of STP CQUIN</p> <p>Monthly NHSI/E submission and review meetings</p> <p>Single Oversight Framework</p> <p>NAA Benchmarking information and collaborative reviews.</p> <p>Model Ambulance benchmarking</p> <p>Annual Report and Accounts to NHSE/I</p> <p>Professional standards</p> <p>Regulatory frameworks</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p>	<p>1) Medium term financial planning</p> <p>2) Change and uncertainty in NHS funding: impact of interim financial arrangements on Trust financial plans (and risk of deficit position)</p> <p>3) Internal controls and financial governance</p> <p>4) Effective contract and transaction management arrangements</p>	<p>1a) Implement medium term financial plan aligned to Trust strategy ED.F Ongoing throughout 2020/21 subject to COVID costs and interim NHS financial regime(s)</p> <p>2a) Agree and implement Trust financial plan for 2020/21, including review and update of financial plans in-year in response to COVID-19 arrangements ED.F Ongoing throughout 2020/21</p> <p>2b) Comply with interim financial arrangements associated with COVID arrangements ED.F Ongoing throughout 2020/21</p> <p>2c) Develop and deliver Cost Improvement Plan or equivalent internal savings plan ED.F Ongoing throughout 2020/21</p> <p>2d) Implement additional internal measures to mitigate risk of year-end deficit position ED.F Ongoing throughout 2020/21</p> <p>2e) Develop and deliver the capital plan for 2020/21, adjusting for COVID needs as required ED.F Ongoing throughout 2020/21</p> <p>2f) Maintain financial position on delivery of the national agency cap ED.F Ongoing throughout 2020/21</p> <p>2g) Implement saving opportunities collaboration with partners ED.F Ongoing throughout 2020/21</p> <p>2h) Secure income through service tenders / other development opportunities, subject to COVID interim NHS financial regime(s) ED.F Ongoing throughout 2020/21</p> <p>3a) Review and strengthen internal financial management controls, governance, audit, assurance and reporting, including appropriate treatment of assets ED.F, March 2021</p> <p>3b) Review and refresh the financial scheme of delegation as part of the Accountability Framework ED.F March 2021</p> <p>4a) Robust management of contracts and transactions, including transparent contract negotiations and variations ED.F ongoing throughout 2020/21</p>
						<p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p>		

4. We use resources wisely to invest in and sustain services								
Principal Risk Ref No:	Risk Score C x L			Corporate Risks	Key Controls	Internal Assurance (3 Lines of Defence)	Gaps in Controls and/or Assurances	Action to Address Gaps and Timeframe
Exec Lead / Risk Area	Initial	Current	Target			External Assurance		
<p>4b) Ability to deliver our requirements and ambitions regarding key enabling infrastructure (digital technology and estates)</p> <p>CQC domains:</p> <p>All</p> <p>TEG Lead(s):</p> <p>Chief Information Officer</p> <p>Executive Director: Finance</p> <p>COMMITTEE ASSURANCE:</p> <p>QUALITY COMMITTEE</p> <p>FINANCE AND INVESTMENT COMMITTEE</p>	4 x 4 = 16	4 x 4 = 16	4 x 3 = 12	<p>Digital / Information Risks</p> <p>Risk 28: Management of paper records</p> <p>Risk 30: Staff data security training</p> <p>Risk 59: Avaya telephony system</p> <p>Risk 61: Emergency Services Communications (Airwave Replacement) Programme</p> <p>Risk 116: Unified Comms: voice comms</p> <p>Risk 120: Unified Comms: COVID impact</p> <p>Risk 225: Unified Comms: software tests</p> <p>Risk 128: Deployment of devices</p> <p>Risk 287: Management of IT equipment</p> <p>Risk 231: EPR Phase 3: dependencies</p> <p>Risk 235: EPR Phase 3: engagement</p> <p>Risk 241: Voice recorder failure</p> <p>Risk 293: N365 project maturity</p> <p>Risk 308: N365: Office 2010 security</p> <p>Risk 309: N365: SharePoint 2010 security</p> <p>Estates Risks</p> <p>Risk 41: Premises security</p> <p>Risk 62: Climate change</p> <p>Risk 84: Operational estate suitability</p> <p>Risk 298: Hygiene and social distancing</p> <p>Risk 302: Social distancing space in Callflex</p>	<p>Programme / Project Plans</p> <p>DSP Toolkit / GDPR compliance</p> <p>CareCERT Alerts (NHS Digital)</p> <p>NHS Secure Boundary (NHS Digital)</p> <p>Trust policies and procedures</p> <p>Trust Digital Strategy</p> <p>NAA Digital Lead</p> <p>Mandatory training: data security awareness</p> <p>DPIAs</p> <p>Professional Standards (e.g. ITIL, ISO etc)</p> <p>IAO processes</p> <p>Health and Safety processes</p> <p>Risk Assessment</p>	<p>Board Level Assurance / Oversight</p> <p>Trust Board</p> <p>Board Committees</p> <p>Audit Committee</p> <p>1st Line of Defence</p> <p>Directorate Management Groups</p> <p>Digital Management Group</p> <p>Programme / Project Boards</p> <p>Trust management bodies: TEG, TMG</p> <p>Integrated Performance Report</p> <p>2nd Line of Defence</p> <p>IG governance processes</p> <p>Infrastructure Programme Board</p> <p>PMO programme assurance</p> <p>SIRO and DPO processes</p> <p>Risk and Assurance Group</p> <p>Inspections for Improvement Process</p> <p>3rd Line of Defence</p> <p>Internal Audit Reviews:</p> <p>DSP Toolkit (20/21, 19/20, 18/19)</p> <p>CAD Command and Control (20/21)</p> <p>Home Working Security (20/21)</p> <p>IM&T Governance (21/20)</p> <p>User Management (19/20)</p> <p>Mobile Device Management (19/20)</p> <p>Server Management (19/20)</p> <p>Network Device Security (18/19)</p> <p>IT Service Desk Management (18/19)</p> <p>IM&T Risk Management (18/19)</p> <p>Estates Maintenance (18/19)</p> <p>External Assurance / Oversight</p> <p>System-wide boards (ICs, NAA etc)</p> <p>DSP Toolkit assessment / audit</p> <p>External cyber security assessment (NHS Digital)</p> <p>Information Commissioner</p> <p>Reporting / accountability to govt depts and agencies (NHSE/I, CQC etc)</p> <p>Health and Safety Executive</p>	<p>1. Capacity and capability to deliver the Digital Strategy and other technology priorities</p> <p>2. ICT service, equipment and infrastructure demands arising from COVID response</p> <p>3. Delivery of specific high priority digital technology projects</p> <p>4. Cyber security capability</p> <p>5. Ability to deliver estates requirements arising from COVID response</p> <p>6. Future estates capacity and configuration</p>	<p>1a) Recruitment, retention and training strategies to ensure required levels of capacity and capability CIO March 2021</p> <p>1b) Review and refresh of operating model for technology functions CIO March 2021</p> <p>2a) Deliver technology and equipment to support rapid expansion and subsequent consolidation of home working CIO April 2020</p> <p>2b) Deliver digital innovations for frontline care relating to COVID response and recovery (e.g. digital triage) CIO April 2020</p> <p>2c) Deliver technology infrastructure to support estate / office reconfigurations to create safer workplaces CIO ongoing</p> <p>3a) Deliver the Unified Comms implementation project CIO delivery milestones during 2020/21</p> <p>3b) Deliver the N365 implementation project CIO, delivery milestones during 2020/21</p> <p>3c) Deliver the ePR Phase 3 project</p> <p>3d) Progress the Emergency Services Communications Programme in line with national programme timelines, CIO March 2021</p> <p>4a) Ensure Trust compliance with relevant cyber security standards CIO March 2021</p> <p>5a). Create and maintain safer workplaces in line with national COVID guidance. ED.F June 2020 and ongoing</p> <p>5b) Deliver capacity increases to manage the impact of social distancing models ED.F, ED.QGPA June 2020 and ongoing</p> <p>6a) Deliver short-term capacity increases to meet the needs of service expansion (e.g. NHS 111) ED.F December 2020</p> <p>6b) Develop options for future capacity and configuration of the Trust's estate ED.F March 2021</p>

Three Lines of Defence Risk Assurance Model



Risk Management and Assurance Information Flows

