



AGENDA ITEM

5.2

CTM BOARD

BOARD ASSURANCE FRAMEWORK REPORT

Date of meeting	26/05/2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Cally Hamblyn, Assistant Director of Governance & Risk / Wendy Penrhyn-Jones, Head of Corporate Governance & Board Business
Presented by	Cally Hamblyn, Assistant Director of Governance & Risk and Executive Directors (Strategic Risk Owners)
Approving Executive Sponsor	Director of Corporate Governance / Board Secretary
Report purpose	FOR APPROVAL

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Strategic Risk Owner updates	April 2022	Reviewed and signed Off
Strategic Leadership Group	May 2022	Management sign off received.

ACRONYMS

BAF	Board Assurance Framework
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1. SITUATION/BACKGROUND

- 1.1 It is good practice for the Health Board to have a Board Assurance Framework (BAF) that clearly sets out the risks, actions and relevant sources of internal and external assurances to provide a clear picture of the 'health' of the organisation and the high level risks threatening delivery of the Board's strategic goals. The concept for the revised BAF was approved at the Board on the 31st March 2022.
- 1.2 Following the report received by the Board in March 2022, it was agreed that a revised reporting process would be put into place whereby a BAF, Risk Appetite Statement and Risk Domain Scoring matrix would be presented at each future meeting, initially with the overarching Risk Register initially.

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 The new BAF has been developed to ensure it appropriately reflects;
 - the four new strategic goals of the Health Board;
 - assurance reporting that supports a streamlined and effective committee and reporting structure;
 - a robust mechanism that reaches into each of the localities and central functions to provide assurance on performance, quality and resources across the breadth of the integrated Health Board;
 - international best practice; and
 - the management of board meetings and agendas to be focussed equally on Oversight, Insight and Foresight i.e. balancing the governance of immediate operational priorities with the need to focus on long-term strategic planning.
- 2.2 This is the first time the Board is formally receiving the 'populated' Board Assurance Framework Report for review and consideration following its approval in March 2022.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 During April/May 2022, the Strategic Risk Owners robustly reviewed and populated the BAF report to ensure it reflects the latest position.
- 3.2 Please refer to Appendix 1 which outlines the key risks for discussion and review by the Board.
- 3.3 The Board are asked to consider and discuss this first iteration of the BAF and comment on the approach and content to inform any further development that may be required. The Board is also asked to

consider whether, in light of the BAF report, the continued receipt of the Organisational Risk Register (Appendix 2) at the same time is still required. The Organisational Risk Register will continue to be received and scrutinised by Board Committees and can be provided to colleagues at any time upon request. For completeness, on this occasion the usual analysis is set out below:

NEW RISKS

- **Patient Care & Safety** - Datix ID 4315 – Fire Training Provision. Risk rated as a 16.
- **Patient Care & Safety** - Datix ID 4417 – Management of Security Doors. Risk rated as a 16.
- **Patient Care & Safety** - Datix ID 4780 – Patient Handling Training. Risk rated as a 16.
- **Patient Care & Safety** - Datix ID 4809 –Violence & Aggression Training. Risk rated as a 16.
- **Patient Care & Safety** - Datix ID 4827 – Face-fit Training and Trainers. Risk rated as a 16.
- **Patient Care & Safety** - Datix ID 4971 – Adult Special Care Dentistry. Risk rated as a 15.
- **Patient Care & Safety** - Datix ID 4975 – Repatriation of patients following vascular surgery. Rated as a 15.
- **Patient Care & Safety** - Datix ID 5036 – Ability of Pathology Services to meet workload demands. Rated as a 20.

CHANGES TO RISKS

a) Risks where the risk rating INCREASED during the period
Nil.

b) Risks where the risk rating DECREASED during the period

Therapies & Health Sciences

- Datix ID 4866 - Lack of dedicated dietetic provision to Upper GI Oncology patients across CTMUHB. Risk reduced from a 20 to a 12.

Rhondda Taf Ely Locality

- Datix ID 4722 – Senior Medical Workforce Shortfall. Risk Reduced from a 20 to a 12.
- Datix ID 4873 – The implementation of the TRAK 2016 LIMS within Blood Transfusion. Reduced from a 16 to a 12.

Patient Care & Safety – Clinical Education

- Datix ID 5031 - Clinical Education & Training Accommodation. Risk Reduced from a 15 to a 12.

Improving Care – Medical Staffing

- Datix ID 4997 – Medical Workforce Shortfall – Risk Reduced from a 12 to a 8.

CLOSED RISKS FROM THE ORGANISATIONAL RISK REGISTER

Bridgend Locality Group

- Datix ID 4841 – Sustainability of Mental Health Services in CTM. Risk now closed.

Merthyr & Cynon Locality Group

- Datix ID 4294 – Long waiting times and large backlog of patients awaiting Cardiac Echo.

EMERGING RISKS

- The Executive Medical Director is exploring the escalation of a risk relating to Clinical Policies.
- Rhondda Taf Ely Locality are developing a cancer site specific risk around breast.
- Merthyr Cynon Locality are due to escalate risk ID 4728 Neurology Service PCH which currently has a risk rating of 20, currently in discussion with counterparts in RTE Locality to consider if this has wider Health Board implications.
- A risk in relation to Diagnostics is being considered.
- Pan-Health Board Risk in relation Delayed Discharge.
- The Chief Operating Officer is exploring the escalation of a risk in relation to the backlog in children receiving screening in Bridgend schools.
- The Chief Operating Officer is exploring the escalation of a risk in relation to therapy input for stroke patients.
- The Director of Digital is exploring the escalation of a risk in relation to Medical Records.

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	The BAF will provide a robust mechanism that reaches into each of the localities and central functions to provide assurance on performance, quality and resources across the breadth of the integrated Health Board; international best practice; and
Related Health and Care standard(s)	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:



Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below) If no, please provide reasons why an EIA was not considered to be required in the box below. Not applicable
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Goals	Improving Care

5. RECOMMENDATION

5.1 The Board is asked to:

- **APPROVE** the Board Assurance Framework Report.
- **CONSIDER** – the position outlined in section 3.3 as to whether the Organisational Risk Register is required to be received with the BAF Report in future meetings.