



Report Cover Sheet

Report to:	Trust Board	
Date of the Meeting:	21 July 2020	
Agenda Item:	P1-124-20	
Title:	Board Assurance Framework – Quarter 1	
Report prepared by:	Angela Wendzicha	
Executive Lead:	Liz Bishop	
Status of the Report:	Public	Private
	X	

Paper previously considered by:	Audit Committee.
Date & Decision:	21 July 2020

Purpose of the Paper/Key Points for Discussion:	<p>The Board Assurance Framework (BAF) provides a structure and process which enables the Trust to focus on those risks which may compromise achievement of our strategic objectives.</p> <p>The Board will note the addition of the risk relating to BAME staff groups included within Strategic Priority 2.</p> <p>The BAF has been further reviewed and developed during Quarter 1 and will be aligned to each of the Board Committees and a process of monthly review with the Executive Directors has been scheduled.</p>
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Action Required:	Discuss	X
	Approve	
	For Information/Noting	X

Next steps required	From September, the BAF will be presented to each Board Committee and discussed as part of the Committee business as a standing agenda item.
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The paper links to the following strategic priorities (please tick)

Deliver outstanding care locally	X	Collaborative system leadership to deliver better patient care	X
Retain and develop outstanding staff	X	Be enterprising	X
Invest in research & innovation to deliver excellent patient care in the future	X	Maintain excellent quality, operational and financial performance	X

The paper relates to the following Board Assurance Framework (BAF) Risks

BAF Risk	Please Tick
1. If we do not optimise quality outcomes we will not be able to provide outstanding care	√
2. If we do not prioritise the costs of the delivering the Transforming Cancer Care Programme we will not be able to maintain our long-term financial strength and make appropriate strategic investments.	√
3. If we do not have the right infrastructure (estate, communication & engagement, information and technology) we will be unable to deliver care close to home.	√
4. If we do not have the right innovative workforce solutions including education and development, we will not have the right skills, in the right place, at the right time to deliver the outstanding care.	√
5. If we do not have an organisational culture that promotes positive staff engagement and excellent health and well-being we will not be able to retain and attract the right workforce.	√
6. If we fail to implement and optimise digital technology we will not deliver optimal patient outcomes and operational effectiveness.	√
7. If we fail to position the organisation as a credible research partner we will limit patient access to clinical trials and affect our reputation as a specialist centre delivering excellent patient care in the future.	√
8. If we do not retain system-side leadership, for example, SRO for Cancer Alliance and influence the National Cancer Policy, we will not have the right influence on the strategic direction to deliver outstanding cancer services for the population of Cheshire & Merseyside.	√
9. If we do not support and invest in entrepreneurial ideas and adapt to changes in national priorities and market conditions we will stifle innovative cancer services for the future.	√
10. If we do not continually support, lead and prioritise improved quality, operational and financial performance, we will not provide safe, efficient and effective cancer services.	√

Equality & Diversity Impact Assessment

Equality & Diversity Impact Assessment	YES	NO
Are there concerns that the policy/service could have an adverse impact on:		
Age		X
Disability		X
Gender		X
Race		X
Sexual Orientation		X
Gender Reassignment		X
Religion/Belief		X
Pregnancy and Maternity		X

If YES to one or more of the above please add further detail and identify if a full impact assessment is required.

Strategic Priority 2		Retaining and Developing Outstanding Staff				Quarter 1 2020-21	
BAF Risk	Risk Rating	Impact	Likelihood	Score			
2.1 We do not recruit staff required for CCC-L	Risk on Identification:	5	5	25			
	Current Risk:	4	4	16		16	
	Target Risk:						
2.2 We do not develop an inclusive leadership	Risk on Identification:	4	3	12			
	Current Risk:			12		12	
	Target Risk:	2	2	4			
2.3 BAME staff are at higher risk of contracting Covid-19	Risk on Identification:	5	3	15			
	Current Risk:	5	1	5			
	Target Risk:	5	1	5			
Controls and Mitigations (what are we currently doing about this risk)			Assurances/Evidence (how do we know we are making an impact)			Gaps in Controls/Assurances (actions to achieve target risk scores)	
Staff Survey			Completion of E-PADR to confirm site of working				
Monthly Team Brief cascade			Recruitment of nursing staff in place			Education Programme to be finalised and agreed	
Workforce, Education and OD Committee bi-monthly			WRES and WDES Board papers			Ongoing OD Programme to be completed	
Equality and Diversity Committee established			Equality and Diversity Strategy approved by Board			Model rotas incomplete	
Workforce Committee now meeting bi-monthly			Freedom to Speak Up Annual Report				
Risk assessments completed for all BAME staff at work and provisions to mitigate any risks put in place			Risk assessments received and monitored by WOD, managers to review on ongoing basis				
Executive Lead:			Board or Committee:			Links to Risk Register	
Director of Workforce			Quality Committee			Risks 365,877,895,93 3,1035,1078,11 69,1213,1232,1 233,1270,896,7 99	
						Review Date: Jul-20	
Risk Heat Map							
				2			
		11					

