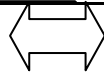
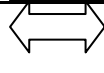
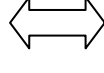







# Board Assurance Framework - Status Report as at 11 June 2008





Rank	BAF ref	Core Stds	Risk Description	Risk Owner	Current Risk Rating			Board Reporting as at April 2008			Action required to improve Board assurance	Risk Rating Shift
					L	C	R	What reports is the Board getting which advise it on the current status of this risk?	Is the Board adequately informed about the current status of this risk?			
1	1.4	C7d	Significant reduction in surplus and loss of income leading to a risk rating of 3.	DS		4	4	16	Monthly Financial Report, 2008/09 Integrated Business Plan	Yes	No	
2	4.8	C13c	Contravention of principle 7 of the Data Protection Act relating to accidental loss, damage or destruction of identifiable information	FC (DS)		4	4	16	Actions required reported to the Board 4 March 2008. Ongoing work taking place on policies, audits and monitoring arrangements. New appointment has been made (May 2008) with the role of monitoring this.	Yes, with additional scrutiny at present. Internal audit of data security to be commissioned. Report to be brought to the Board on Information Governance and the work of the Information Governance steering group.	Yes [see column on left]	
3	1.6		The Trust failing to progress its strategic developments due to the complexity of the rules, constraints and targets it needs to meet and the outcomes it wants when undertaking large strategic developments.	SG		4	4	16	Programme Management approved by BoD and reviewed by an external Gateway Review team. Gateway process reported to Audit Committee in April 2008.	Yes. The Board can be assured by the rigour of the Gateway process. Major strategic developments are being reported to the board.	No	New Risk 22 April 08
4	2.6	C18	Changing demographics and service planning issues are giving us a capacity problem.	RS		4	4	16	Monthly Operations Report to Board and AEB	Yes	No	
5	3.6	C1a&b C4b&c	Medical devices and equipment do not meet the changing needs of the organisation.	SG (?)		3	4	12	Audit Committee discuss current status, Investment Board review future investment needs	Yes	No	

# Board Assurance Framework - Status Report as at 11 June 2008

Rank	BAF ref	Core Stds	Risk Description	Risk Owner	Current Risk Rating			Board Reporting as at April 2008			Action required to improve Board assurance	Risk Rating Shift
					L	C	R	What reports is the Board getting which advise it on the current status of this risk?	Is the Board adequately informed about the current status of this risk?			
6	4.1	C1 C4	Not having the right culture, systems and processes to ensure patient safety is allocated the right priority (not just having the procedures, but following them)	JA		3	4	12	Board approves Risk Management Strategy, Monthly Report on Infection Control. Minutes Clinical and Corporate Governance committee	Yes	No	
7	3.4	C1 C4	Not providing a suitable environment to ensure patients are treated safely e.g access to emergency theatres and isolation facilities, ICU	RH		4	3	12	2008/09 Integrated Business Plan, Quarterly Report from Director of Corporate Development, Investment Board minutes, Annual Report on Estates. Regular reports on infection control highlight issues relating to isolation facilities.	Yes	No	
8	5.2	C8	Imbalance in the ratio of staff to activity, in particular nursing staff	KC, RIS		4	3	12	Monthly Operations Report, Monthly Nursing Report (from 29-04-08), National Staff Survey (annual)	Yes	No	
9	1.5		Too many opportunities – over-commitment – too much choice	SG		3	4	12	Monthly Financial Report, 2008/09 Integrated Business Plan, Investment Board minutes	Yes. The new head of Business Development and Marketing is presenting the market analysis to BoD in June 2008	No	

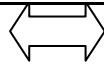
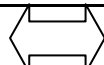


# Board Assurance Framework - Status Report as at 11 June 2008

Appendix 1

Rank	BAF ref	Core Stds	Risk Description	Risk Owner	Current Risk Rating			Board Reporting as at April 2008			Risk Rating Shift
					L	C	R	What reports is the Board getting which advise it on the current status of this risk?	Is the Board adequately informed about the current status of this risk?	Action required to improve Board assurance	
10	2.5	C6 C8	The effective use of the choose and book system across the whole health economy resulting in the Trust losing out to the competition in patient choice.	SG			12	Discussion at Joint PCT/Trust Board - these are expected to take place quarterly from now. Action plan in place.	Historically no, but this has been addressed by now being captured in the performance indicators being reported to the Trust Board	Yes [see column on left]	
11	5.1	C8	Inadequate workforce planning and data to support effective workforce planning (vacancy levels, recruitment, retention, succession planning, skill mix, re-skilling, reliance on key personnel)	KC			12	Some information included in Monthly Operations report and Monthly Nursing report from April 2008	Yes	No	
12	3.1	C6	The Trust's capacity stretched to the limit due to increasing activity and lack of external capacity for discharging patients into the community. This creates unacceptably high occupancy levels and a stressed workforce which compromise patient care and safety. Not keeping up with changing demographics (size & profile – age, ethnicity etc.) [NB This risk combines the former risk ref 4.6 which was a duplicate]	RS			12	Monthly Operations Report to Board and AEB, Annual National Staff Survey Monthly Nursing Report, agenda item for joint board with PCT	Yes	No	
13	4.2	C1 C4	Incomplete information on whether individual directorates/ wards/clinics are treating patients safely	JA			12	Clinical and Corporate Governance committee minutes, Patient Safety Executive and Patient Safety Board.	Further discussion required to ensure that appropriate escalation of exceptions are made to the Patient Safety Executive, Patient Safety Board and CCGC.	Yes [see column on left]	






# Board Assurance Framework - Status Report as at 11 June 2008

Appendix 1


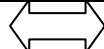
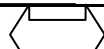
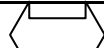
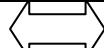
Rank	BAF ref	Core Stds	Risk Description	Risk Owner	Current Risk Rating			Board Reporting as at April 2008			Action required to improve Board assurance	Risk Rating Shift
					L	C	R	What reports is the Board getting which advise it on the current status of this risk?	Is the Board adequately informed about the current status of this risk?			
14	4.4	C24	A pandemic outbreak	RS			12	Emergency Planning committee has reported to the Board in January 2008. Clinical and Corporate Governance committee minutes	Yes	No		
15	5.4	C8	Not dealing effectively with the consequences of changing medical education – MMC, MTAS.	JA			10	Exception reporting to the Board if problems are likely to emerge in 2008. Reporting to AEB is starting in June 2008	Yes	No		
16	3.2		IT applications are getting increasingly out of date and failing to meet requirements	FC (DH)			9	Revised IT Strategy agreed by AEB. IT Programme Board minutes go to Clinical and Corporate Governance committee.	CCGC monitor the controls operating over this risk and will escalate to board when necessary. Report to be brought to the Board on Information Governance and the work of the Information Governance steering group.	Yes [see column on left]		
17	5.5	C7d&e	Increase in equal pay claims as a result of increasing litigiousness post-A4C in the rest of the NHS	KC			9	Director of Nursing and OD reports monthly to the Board and will raise any emerging issues. Clinical and Corporate Governance committee minutes will note any issues picked up at the Equality and Diversity steering group	Yes	No		

# Board Assurance Framework - Status Report as at 11 June 2008

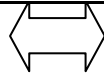



Appendix 1

Rank	BAF ref	Core Stds	Risk Description	Risk Owner	Current Risk Rating			Board Reporting as at April 2008			Action required to improve Board assurance	Risk Rating Shift
					L	C	R	What reports is the Board getting which advise it on the current status of this risk?	Is the Board adequately informed about the current status of this risk?			
18	5.3	C8	Dilution in the quality of nurse training at the merged Anglia Ruskin/ Homerton school leads to a reduction in the quality of trained nurses	KC		3	3	9	Monthly report from the Director of Nursing and OD to the board.	Yes	No	
19	2.1	C3 C5	Clinical priorities and investment priorities are not aligned.	JA		3	3	9	Investment Board minutes.	No. A Clinical Strategy is being prepared in 2008/09 and will be reported to the Board in March 2009	Yes [see column on left]	
20	2.3	C7	The Trust loses income through insufficient knowledge of the competition (eg. Moorfields or Papworth brands) or inadequate marketing.	SG		3	3	9	First stage (appointment of Marketing team) achieved - reporting arrangements to the Board are in hand.	Yes. The new head of Business Development and Marketing is presenting the market analysis to BoD in June 2008	No	
21	3.5		IT infrastructure may not be sufficiently resilient	FC (DH)		3	3	9	Revised IT Strategy agreed by AEB. IT Programme Board minutes go to Clinical and Corporate Governance committee.	CCGC monitor the controls operating over this risk and will escalate to board when necessary. Report to be brought to the Board on Information Governance and the work of the Information Governance steering group.	Yes [see column on left]	
22	4.3	C24	Being ill-equipped to manage a major incident safely	RS		2	4	8	Emergency Planning committee has reported to the Board in January 2008. Clinical and Corporate Governance committee minutes	Yes	No	


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					L	C	R	What reports is the Board getting which advise it on the current status of this risk?	Is the Board adequately informed about the current status of this risk?			
23	2.4	C1 C4	Damage to the reputation of the Trust due to incidents/issues that would generate adverse publicity	RM	4	2	8	Communications strategy reported annually	Yes	No		
24	4.7	C3	Unreasonable demands/ changing standards and targets as a result of new regulatory regimes	AA	2	4	8	Quarterly reports against the current core standards	Yes	No		
25	1.1	C7d	Significant reduction in surplus and loss of income because we're not adapting quickly enough to what our commissioners/ patients want	CB	2	4	8	Monthly Financial Report, 2008/09 Integrated Business Plan, Investment Board minutes, Commissioning update (January to April), Quarterly reports on the patient experience. Marketing report to come to the Board in June 2008	Yes	No		
26	1.3		Bureaucracy, process and periods of low productivity are hampering the pace of change. A risk averse and not an entrepreneurial culture.	GG	2	4	8	Quarterly reports from the Director of Corporate Development on strategic initiatives and non-regulated income. Investment Board minutes	Yes	No		
27	2.2	C6	The Trust innovating at a faster pace than commissioners/ GPs, creating a service for which there is no demand	CB	2	4	8	Investment Board minutes. Director of Corporate Development reports quarterly strategic initiatives and non-regulated income	Yes	No		

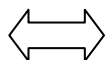
# Board Assurance Framework - Status Report as at 11 June 2008

Rank	BAF ref	Core Stds	Risk Description	Risk Owner	Current Risk Rating			Board Reporting as at April 2008			Action required to improve Board assurance	Risk Rating Shift
					L	C	R	What reports is the Board getting which advise it on the current status of this risk?	Is the Board adequately informed about the current status of this risk?			
28	3.3	C4 C20	The estate/ infrastructure doesn't meet the changing needs of the organisation	RH		4	2	8	Annual Report on Estates, Investment Board minutes. ERIC reports to the DH annually on 730 reporting lines relating to estates.	Yes	No	
29	5.6	C8	High staff turnover as a result of low staff morale as a result of poor working practices, a stressful working environment, failure to address incidences of discrimination, harassment, bullying etc.	KC		2	3	6	National staff survey reported to the Board annually and will identify trends. Monthly report from Director of Nursing and OD to the board.	Yes	No	
30	3.7	C20 C24	Business continuity as a consequence of being unable to use the physical estate (eg. through fire, contamination etc.)	RH		2	3	6	Relevant committees report to Clinical and Corporate Governance committee which also reviews the risk register	Clinical and Corporate Governance monitor the controls over this risk, with escalation should risk rating increase.	No	
31	1.2	C7d	Significant loss of income because we're not identifying new income generation opportunities and/or innovating quickly enough (eg. diagnostics in the community)	SG		2	3	6	Monthly Financial Report, 2008/09 Integrated Business Plan, Investment Board minutes, Quarterly report from Director of Corporate Development on strategic initiatives and non-regulated income	Yes	No	

# Board Assurance Framework - Status Report as at 11 June 2008

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					L	C	R	What reports is the Board getting which advise it on the current status of this risk?	Is the Board adequately informed about the current status of this risk?			
32	2.7	C14	Not complying with Section 11 of the H&SC Act to engage with patients and public over service change, failure to identify levels of patient satisfaction in services which could affect choice of hospital	BH		2	3	6	Quarterly patient experience reports, Patient Survey data	Yes	No	New Risk 22 April 08
33	4.9	C14	Not dealing with complaints comprehensively or within required timeframe; particularly with introduction of new regulations due mid 2008 (details as yet unconfirmed)	BH		2	3	6	Quarterly patient experience reports.	Yes	No	New Risk 22 April 08
34	5.7	C8	Lack of awareness, understanding and engagement with staff as a result of failing to maintain effective channels of communication	RM		1	4	4	Communications strategy reported annually	Yes	No	

Key



No change



Increase in risk rating



Reduction in risk rating