

Governing Body meeting (held in public)

DATE: 30 July 2015

Title	Board Assurance Framework	
This paper is for Discussion		
Recommended action for the Governing Body	That the Governing Body: Note the risks identified and recorded board assurance framework of the CCG.	
Potential areas for Conflicts of interest	None.	
Executive summary	The report provides assurance to the Governing Body on current risks on the GGC's corporate risk register with residual risk ratings of 15 and above. The report has two risks; one from Commissioning and the other from Governance and Quality.	
How does this paper support the CCGs objectives	Patients:	Failure to identify and manage the CCG's risks may impact on service delivery and patient care
	People:	Failure to identify and manage the CCG's risks may impact on the work on the CCG staff and service delivery
	Pounds:	Failure to identify and manage the CCG's risks may lead to increased costs with financial consequences for the CCG
	Process:	Failure to identify and manage the CCG's risks may lead to the delivery of unsafe services and failure to improve outcomes for patients
What are the Organisational implications	Key risks	Failure to identify and manage effectively risks within the organisation.
	Equality	None
	Financial	Failure to identify and manage effectively risks within the organisation may impact on the finances of the

Clinical Commissioning Group

	organisation	
	Data	None
	Legal issues	None
	NHS constitution	None
Engagement	None	
Audit trail	None	
Comms plan	None	
Author: Elinam Attipoe, Corporate Governance and Risk Manager	Clinical lead: Howard Stoate, NHS Bexley CCG Chair	Executive sponsor: Simon Evans-Evans, Director of Governance & Quality
Date	20 July 2015	

Introduction

The report presents the Board Assurance Framework (BAF) to governing body. The BAF is made up of risks with a residual rating of 15 and above in the corporate risk register. It is intended to provide assurance to the governing body on how effectively managers and directors are managing the corporate risks of the organisation.

The report is derived from the new 2015-16 corporate risk register. The CCG's Assistant Directors continue to meet monthly to review the risk register. They, as owners of many of the risks, review the risks, updating them when necessary. They also identify new risks within their directorates and with the approval of their directors add these to the register. Departmental teams also review their risks at their various meetings.

Risk Register

As part of the CCG's risk management and assurance process, the Governing Body at each meeting should have an oversight of all risks with ratings of 15 and above. Currently, there are two risks that meet the criteria on the Board Assurance Framework; one from Commissioning and other from Governance and Quality.

The attention of the Governing Body is drawn to:

- Risk 198 relates to the triangulation in 2015-16 from both soft and hard data suggests that there are a number of quality and safety issues at QEH (L&Q Trust). The risk has a residual risk rating of 15 but a target of 6
- Risk 220 records failure by LGT to provide adequate assurance that 18 week RTT compliance trajectory will be met. It has a residual risk rating of 15 and a target of 6.

Recommendation

The Governing Body is asked to consider and note the Board Assurance Framework.



**NHS Bexley Clinical Commissioning Group
Board Assurance Framework (All Risks Scored above 15+)**

Risk Ref	Risk <i>High-level potential risks that are unlikely to be fully resolved and require ongoing control</i>	Movement since Last Assessment	Residual Risk Rating			Forecast Risk Rating		
			Likelihood	Impact	RAG Status	Likelihood	Impact	RAG Status
198	The triangulation of information in 2015-16 from both soft and hard data suggests that there are a number of quality and safety issues at QEH (L&G Trust). (Dir: Governance And Quality)	↔	3	5	15	2	3	6
220	Failure by LGT to provide adequate assurance that 18 week RTT compliance trajectory will be met (Dir: Commissioning)	↑	3	5	15	3	2	6

NHS Bexley Clinical Commissioning Group Board Assurance Framework (All Risks Scored above 15+)

Step 1 - Identify				Step 2 - Evaluate					Step 3 - Plan			Step 4 - Record & Review									
Date Raised	Ref	Accountable Lead (Risk Owner) Accountable Director (Risk Sponsor)	Risk Description & Cause (What could prevent the Objective from being achieved)	Potential Consequence (Impact)	Inherent Likelihood Score	Inherent Impact Score	Inherent Risk Rating	Controls In Place i.e. Actions implemented where this is evidence/documentated note evidence of Risk being controlled	Residual Likelihood Score	Residual Impact Score	Residual Risk Rating	Risk Movement from Last Assessment	Risk Response	Target Risk Rating	Control Gap What further action needs to be put in place	Action Deadline	Forecast Likelihood (Post Actions)	Forecast Impact (Post Actions)	Forecast Risk Rating (Post Actions)	Interdependencies i.e. Does it Impact any one else	Audit and Integrated Assurance Committee RAG Rating of Mitigating Actions
DIRECTORATE : Commissioning																					
Pounds: Delivering On All Of Our Statutory Duties																					
17/07/2015	220.1	Jonathan Manueljilla Sarah Valentine	Failure by LGT to provide adequate assurance that 18 week RTT compliance trajectory will be met	Statutory failure, CCG operating plan failure	3	5	15	LGT has agreed an RTT recovery and improvement plan with CCG's to achieve RTT compliance in problem specialities by end of Q2	3	5	15	↑	Treat	6			3	2	6		0

NHS Bexley Clinical Commissioning Group Board Assurance Framework (All Risks Scored above 15+)

Step 1 - Identify				Step 2 - Evaluate					Step 3 - Plan				Step 4 - Record & Review								
Date Raised	Ref	Accountable Lead (Risk Owner) Accountable Director (Risk Sponsor)	Risk Description & Cause (What could prevent the Objective from being achieved)	Potential Consequence (Impact)	Inherent Likelihood Score	Inherent Impact Score	Inherent Risk Rating	Controls In Place i.e. Actions implemented where this is evidence/documentated note evidence of Risk being controlled	Residual Likelihood Score	Residual Impact Score	Residual Risk Rating	Risk Movement from Last Assessment	Risk Response	Target Risk Rating	What further action needs to be put in place	Action Deadline	Forecast Likelihood (Post Actions)	Forecast Impact (Post Actions)	Forecast Risk Rating (Post Actions)	Interdependencies i.e. Does it Impact any one else	Audit and Integrated Assurance Committee RAG Rating of Mitigating Actions
DIRECTORATE : Governance And Quality																					
Patients: Improve The Health & Wellbeing Of People In Bexley																					
21/10/2014	198.3	David Parkins Simon Evans-Evans	The triangulation of information in 2015-16 from both soft and hard data suggests that there are a number of quality and safety issues at QEH (L&G Trust).	This may potentially affect the quality and patient safety of service for Bexley patients at QEH.	3	5	15	Monitoring of issues by Bexley CCG quality and patient experience teams Raising of issues at joint L&G CQRG and monitoring of improvement plans. Regular reports on L&G Trust at Quality and Safety Sub-committee and Governing body. CQC report on L&G and assurance meetings around subsequent improvement plan. Issues addressed at SE London Surveillance Group	3	5	15	↔	Treat	6	Escalation to Contract Management Board for contractual penalties for not meeting targets.	30/09/2015	2	3	6		0