



Board Assurance Framework (BAF), Risk Register (RR) and Issues Log (IL)

Rotherham Place Board

19 July 2023

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Purpose of Paper

For members to review and discuss the current Risk Management Framework including Board Assurance Framework, Risk Register and Issues Log on a “by exception” basis

Key Issues / Points to Note

The current BAF, RR and IL (attached as appendix 1) is a standing agenda item on the Rotherham Place Board agenda at each meeting as set out in the ICB Risk Management Framework the Place Board will consider Risk and the BAF at each meeting. A deep dive is conducted on a quarterly basis, with exception reporting occurring between each deep dive. Risks can be added, amended, or deleted at any time by contacting a member of the risk management team, it doesn't have to wait for a meeting.

We have also started to develop a Rotherham Place Partnership Risk Register as we are doing for other areas as well. This is for discussion and the first draft is also shown on the excel spreadsheet (Tab 24). A further separate discussion meeting is probably needed with key staff to take this forward.

Executive Summary

The BAF is attached at tab 5 on the excel spreadsheet.

The Rotherham Place Board has joint oversight of the following risks and is asked to review these risks, please note these are arranged by Score.

Ref	Descriptor	Score	Actions
4.3	The number of transformation workstreams within Places are being delivered. Inherent Risks are mitigated: a. potential funding gap. b. System operational pressures preventing transformation to reduce health	5x4=20	<ul style="list-style-type: none"> • Reviewing approach to savings and transformation between organisations, places, and collaboratives as part of 23/24 planning - finalise July 2023 • ICB QSIR Quality Improvement Methodology Training Programme commenced January 2023 • ICB Transformation PMO review

	inequalities and health outcomes.		completed, and methodology and approach being implemented
1.2	The local healthcare system is sustainable, accessible, and reactive to change, through the development and implementation of effective Local Place Partnerships and Plans.	3x3=9	<ul style="list-style-type: none"> • 2023/24 Operational Plan, including NHSE Assurance Oversight and sign-off - ICB Executive Director Portfolio Objectives • Complete review of all ICB Functions as part of Phase 1 (to June 2023) Organisational Change programme in response to the National ICB Running Cost Allowance Reduction programme. • Change Programme implementation Q2 & Q3; Transition to new Operating Model Q4.
2.1	<p>Through effective Place Partnership Plans, the ICB is tackling inequalities and moving towards greater self-care prevention and patient empowerment.</p> <p>The ICB is able to:</p> <p>a. risk stratify its population;</p> <p>b. engage effectively with all parts of its population to understand quality and patient experience, especially with those seldomly heard; and</p> <p>c. has effective plans to manage unwarranted variation in care and outcomes.</p>	4x2=8	<ul style="list-style-type: none"> • Clear line-of-sight for Health Inequalities investment in the 2023/24 Operating and Financial Plan - Final sign-off in July 2023 ICB Board • Robust ICB 5-year Joint Forward plan - Draft June 2023 • Effective Reporting of progress being made and mainstreaming in the Integrated Performance Report - Q2 2023 Stocktake • - 360 Internal Audit Scheduled
2.3	The ICB works collaboratively with partners to improve health, care and reduce inequalities in well governed and accountable partnerships.	2x3=6	<ul style="list-style-type: none"> • Complete review of all ICB Functions as part of Phase 1 (to June 2023) Organisational Change programme in response to the National ICB Running Cost Allowance Reduction programme. • Change Programme implementation Q2 & Q3; Transition to new Operating Model Q4.
4.4	The ICB is working as part of an integrated care partnership collaborating with the South Yorkshire Mayoral Combined Authority, and partners in the development of priorities and delivery plans.	2x3=6	Robust ICB 5-year Joint Forward plan - Draft June 2023

3.1	<p>The ICB is working in the best way to make sure the best use of resources:</p> <p>a. there is an effective Operating Model to fulfil the organisations objectives.</p> <p>b. Partnership arrangements are fully exploited to secure effective arrangements in Place.</p> <p>c. Strong and effective collaborative arrangements are operating at a system level.</p>	1x3=3	<ul style="list-style-type: none"> • BAF Deep-Dive with Operational Executive and revision, emending in 2023/24 • Review in conjunction with Running Cost Allowance work programme in Q1 23/24.
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There are currently a total of **41** open risks on the Corporate Risk Register. The risks applicable to Rotherham (all places, ICB and Rotherham listings) are shown in tab 10 of the attached excel Spreadsheet.

There are risks with a residual score of 15 or above (threshold for reporting to Board), shown in table 2 below.

Table 2: Risks with a residual score of 15 or above:

Ref	Descriptor	Score	Mitigation / Treatment
SY012	<p>Equality & Diversity - If a culture supportive of equality and diversity is not embedded across the ICB there is a risk that the ICB will fail to discharge its statutory duties as an employer and will not adequately consider issues of equality within the services we commission.</p>	16	<ul style="list-style-type: none"> • ICB has Equality Objectives Action Plan, • Full suite of HR policies in place supported by robust EIA. • EIA Processes • E&D training is a mandatory requirement for all staff. • Values & behaviours included within corporate performance review documentation. • Values & behaviours embedded through use of values-based recruitment techniques and staff networks. • - Regular staff surveys with resulting action plans.

SY028	<p>Oncology Workforce Challenges – in recent months we have become aware of a growing pressure on the oncology workforce, which is replicated nationally, related to the number of Oncologists across services locally. A temporary breast oncology service, head and neck service and lower GI service have been implemented locally to mitigate patient safety risks. Given the temporary nature of this solution further work will be required to identify the longer-term solution which is being led by the Cancer Alliance.</p>	16	National mitigation for recruitment on oncology workforce including mitigation of recruitment barriers (e.g., perceptions of a demanding specialty with complex care and hazardous work environments)
SY082	<p>Adult Mental Health - Sustainability of improvement in the quality of service in relation to Adult MH service across the ICB increasing presentation for Eating Disorders. Unmet need leading to increased acuity in presentation, increase demand in primary care and for crisis support</p>	16	Partnership eating disorders T&F group established, Alternative to Crisis reduction/prevention provision commissioned, Development of MH ARRS model in primary care.

Tab 8 shows the Corporate Organogram which allows Sub committees to understand which risks they are responsible for, for assurance.

The current risks for this committee above the risk appetite of 12 are shown in table 3 below, in addition to those reported in table 2:

Table 3: Risks above risk appetite

Ref	Descriptor	Score	Mitigation / Treatment
SY091	<p>Communications and Engagement Capacity - There is a risk of a legal challenge on an ICB decision being upheld due to insufficient communications and engagement capacity in the ICB, particularly within Place teams, and poor awareness of senior staff on the need to engage and consult around service change resulting in reputational damage, delays in the implementation of transformation and financial costs of fighting judicial review.</p>	12	<p>Ongoing discussions around collaboration for case management, including different responsibilities for case managers and caseloads across the areas.</p> <p>South Yorkshire CETR/DSR Policy being developed with implementation plan including the development of an ICB Oversight panel.</p> <p>C&YP Senior Navigators in post to pick up most complex cases.</p> <p>Additional Navigators will be recruited as part of the C&YP Keyworker expansion programme.</p>

SY013	<p>Financial Pressures – there is a key risk across the system related to the current financial pressures faced by the ICB as it is established, working jointly across the system to deliver efficiencies in year and beyond will be key to financial recovery and we have initiated this work throughout the NHS Operational Planning round, with ICB designates and System Partners.</p> <p>Risk that we cannot achieve the statutory requirement to deliver a break-even position</p>	12	<p>We are now reviewing year end risks and opportunities across each of the NHS organisations with the ICS, to see how we can deliver the best financial performance we can, with some pilot work underway on a place-based recovery plan for Doncaster that we will work on.</p> <p>There has been an approach described for financial planning for 23/24 which starts earlier than the national timetable which has been discussed at FEDG and SLE. There is also work underway to describe the nature and responsibilities for the broader change and transformation plans for 23/24.</p>
SY021	<p>LeDeR - There is a risk that the ICB will not meet national policy requirements for LeDeR, this is due to delays in agreeing workforce and accountability framework, which may result in learning not being identified and embedded across the system to prevent avoidable deaths and reduce health inequalities. The ICB will also be in breach of Nationally set KPI's resulting in further action by NHSE</p>	12	<ul style="list-style-type: none"> • Ongoing discussions around collaboration for case management, including different responsibilities for case managers and caseloads across the areas. • South Yorkshire CETR/DSR Policy being developed with implementation plan including the development of an ICB Oversight panel C&YP Senior Navigators in post to pick up most complex cases Additional Navigators will be recruited as part of the C&YP Keyworker expansion programme.
SY040	<p>Rotherham CAMHS - Sustainability of improvement in the quality of service in relation to CAMHS, specifically neurodevelopmental pathway (1 year waits) in Rotherham. Unmet need leading to increased acuity in presentation, Continued dissatisfaction in the service by GP's, families and young children.</p>	12	<ul style="list-style-type: none"> • Weekly meeting between RICB and RDaSH, CAMHS and TRFT • Monthly CAMHS contract performance meeting.

SY096	Planned Care - The ICB have not eliminated waits of 65 weeks from the system. Deadline is 31st March 2024. Risk to patients and reputation risk to the ICB if not met.	12	<ul style="list-style-type: none"> System oversight recovery plan in place overseen by Kirsty Major, CEO STH and SRO.
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Changes from the previous presentation of Rotherham Place Board's risk portfolio.
 SY057 – This risk had been reviewed and closed, as it is duplicated as an issue (IL10). Additionally, the issue is only in relation to Sheffield.
 SY076 – This risk has been reviewed and closed as not identified as a current risk.

Issues Log

There are currently **10** issues on the Issues log, with 7 related to Rotherham (inclusive of All Places and ICB issues). These can be seen in tab 14 of the attached Spreadsheet.

The current red issues are shown in the table below:

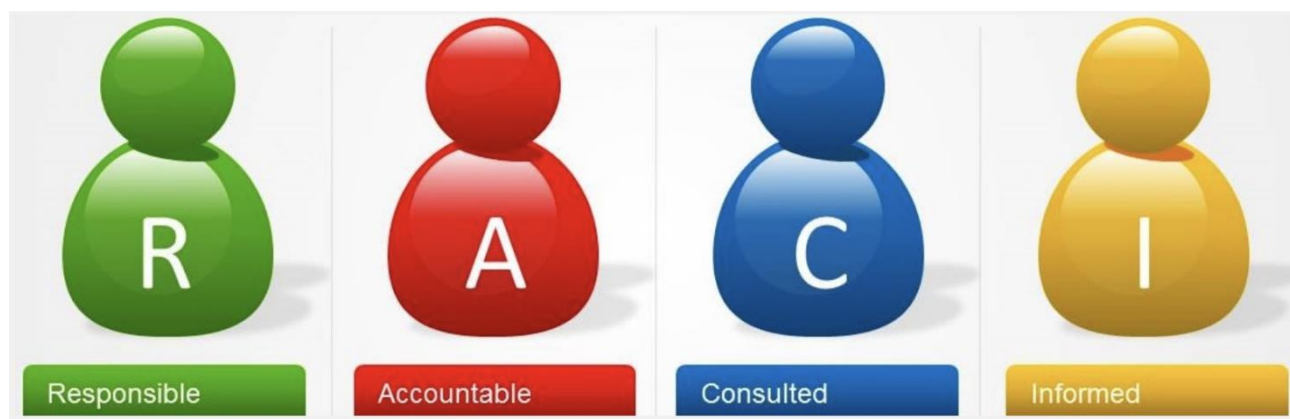
Table 3: Red Issues

Ref	Descriptor	Score	Mitigation / Treatment
IL02	CHC Reporting - If issues in the timely reporting of data continue in relation to Continuing Health Care (Adult and Children) and complex case management (Including S117), this is likely to result in the financial forecast for this area to be misstated and lead to variation in the forecast position, creating financial risk.	20	<ul style="list-style-type: none"> Chief Nurse and CHC/complex case team to work on systems and processes within the team to ensure data is recorded and reported in a timely manner. The Chief Nurse, CHC/complex case and Finance team will also work with Local Authority to ensure reporting issues relating to the brokerage of care are improved with a clear process in place from within Local Authority brokerage/PHB and finance team.
IL03	Strike Action across health and social care workforce - industrial action following union ballots across health and care impacting on all programmes of work in particular the ability to safely deliver urgent and emergency care pathways.	20	Effective incident planning of services local discussion about derogations services that should continue during strike.

IL12	<p>Cancer – Due to a shortfall in the consultant oncology workforce, there is an extension to the wait time for patients requiring non-surgical oncology resulting in possible harm to patients</p>	20	<ul style="list-style-type: none"> • Incident management team established with region which meets fortnightly. • Mutual aid/outsourcing form other areas via "Remedy" and other private providers. • ICB and Acute Federation reporting • Keeping JOSOC informed of developments.
IL06	<p>Urgent and Emergency Care (including 111/999)- there continues to be significant pressure faced by Urgent and Emergency Care Services including the Yorkshire Ambulance Service. Which could result in patient harm, reputational damage for the ICB.</p>	15	<p>We have over recent months initiated a collaborative work programme to tackle these issues across the system and with regional colleagues. As the ICB establishes this will be a key priority to best support the South Yorkshire population and our UEC provider colleagues.</p>
IL07	<p>YAS - If Yorkshire Ambulance Service's (YAS) performance against response time targets is not delivered and sustained at the required level, there is a risk that the quality and safety of care for some patients could be adversely affected.</p>	15	<ul style="list-style-type: none"> • Regional oversight of YAS and management of patient flow for Sheffield providers in the Sheffield Place UEC Delivery Group • Note Contract led from West Yorkshire ICB • SY UEC Board and YAS play an active part in this.
IL08	<p>SALT Provision - There is a risk of Speech and Language Therapy provision specified within Education Health and Care Plans (EHCPs) not being delivered. This is as a result of lack of capacity within the Speech and Language Therapy Team. This is leading to the ICB and Local Authority being unable to meet their statutory duties in relation to SEND and means that children and young people are not having their needs met appropriately.</p>	15	<ul style="list-style-type: none"> • 6-month contract put in place with Private Provider to provide SALT services in the community to carry out the assessment, diagnosis, therapy and management of individuals with communication, speech, language and swallowing disorders, which may be related to various medical conditions. • Referral pathway for direct referral/access to services removed from SWYPFT website as they have ceased providing the services. • Pathway in place for referral of patients with stroke, Parkinson's disease, dementia, head Injury or brain tumour, Motor Neuron Disease, Multiple Sclerosis and COPD.

IL09	<p>Medication Supply - There is a risk that shortages of medicines due to increases in demand and/or supply issues will prevent appropriate treatment/ condition management and potentially increase medicine costs.</p>	15	<ul style="list-style-type: none"> • To communicate deployment of serious shortage protocols • An additional mitigation/ response is a coordinated sharing of out-of-stock information across MO lead by Barnsley Place and tactical level response being developed in the event of a sudden shortage. • To raise with the system control centres the possibility of dealing stock from hospitals, release advice about alternatives and how they can be used to raise with NHS region
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There has been some debate in relation to risks on the ICB Risk Management Framework which are not under the control of the ICB. This is where the RACI model is utilised.



This allows the ICB to understand where the authority for control of the risk lies, specifically in relation to risks that belong to other partners but will impact the ICB in any form e.g., financial pressures, patient flow, capacity etc.

These risks will be added to the ICB Risk register and presented to the assurance committees and Board of the ICB as appropriate.

The BAF, RR and IL have been to the following committees/groups this quarter.

- Operational Executive
- Quality Patient Performance Improvement Experience (QPPIE)
- Finance and Investment
- Rotherham Place Board
- Medicines Optimisation Assurance Group
- People Workforce and Culture Committee

The RR and IL is a live document and may have been updated since the papers deadline.

Is your report for Approval / Consideration / Noting

- For Consideration and discussion.

Recommendations / Action Required

Members are asked to:

- Review the collated SY ICB Risk Register and Issues Log for Quarter 1; and
- Support the ongoing development of the BAF, Risk Register and Issues log.
- Discuss the development of the Rotherham Place Partnership Risk Register.

Board Assurance Framework

This report provides assurance against the following corporate priorities on the Board Assurance Framework (*place ✓ beside all that apply*):

Priority 1 - Improving outcomes in population health and health care.	✓	Priority 2 - Tackling inequalities in outcomes, experience, and access.	✓
Priority 3 - Enhancing productivity and value for money.	✓	Priority 4 - Helping the NHS to support broader social and economic development.	✓

In addition, this report also provides evidence against the following corporate goals (*place ✓ beside all that apply*):

Goal 1 – Inspired Colleagues: To make our organisation a great place to work where everyone belongs and makes a difference.	✓
Goal 2 – Integrated Care: To relentlessly tackle health inequalities and to support people to take charge of their own health and wellbeing.	✓
Goal 3 – Involved Communities: To work with our communities so their strengths, experiences and needs are at the heart of all decision making.	

Are there any potential Risk Implications? (Including reputational, financial etc)?

There are no risk implications.

Are there any Resource Implications (including Financial, Staffing etc)?

There are no financial implications for this paper but notwithstanding some of the risk areas will have financial implications for the ICB.

Are there any Procurement Implications?

There are no procurement implications.

Have you carried out an Equality Impact Assessment and is it attached?

Not applicable

Have you involved patients, carers, and the public in the preparation of the report?

There has been no Patient or public involvement in the development of the BAF, RR or Issues Log but stakeholders/risk owners are being contacted for conversations about their risk profile and this will continue in a structured way during each cycle of updates.

Appendices

The following documents are appended to this cover paper:

- BAF, RR and IL