

BAF SUMMARY (full BAF is available upon request as the detail of the Key Controls, Assurances, Gaps and Actions is not included in the Summary Overview provided below)						
REF.	LEAD EXEC. DIRECTOR (ED)	RISK	RATING	TARGET	MOVEMENT	LAST ED REVIEW
	MONITORING COMMITTEE					REVIEW BY COMMITTEE
1. Quality - Deliver the best possible care and outcomes						
1.1	Chief Nurse Quality Committee	Clinical quality and safety standards Failure to (i) meet quality standards for clinical care; (ii) continuously improve care quality and safety; and/or (iii) engage patients and carers in that care, could result in patient harm, impaired outcomes, and poor experience.	12	8	↔	09/02/21
1.3	Exec MD for MH & LD Quality Committee	Delivery of transformation and effective management of change Failure to deliver transformation, and/or resource and manage change effectively both within the Trust and with system partners could compromise: (i) quality, safety and experience for patients during the transition from current to future service models; (ii) ability to recruit or retain staff, staff morale and wellbeing, and (iii) delivery of the NHS Long Term Plan.	12	8	↔	19/11/21 11/11/21
1.5	Exec MD for MH & LD Quality Committee	Unavailability of beds across mental health inpatient services and LD Unavailability of beds (across all mental health inpatient services, including Adult MH & LD, and CAMHS, PICU, ED & GAU) due to: insufficient bed numbers (including Covid-safe admission beds), and/or absence of support services in the community to prevent admissions and/or facilitate prompt discharge, could lead to: (i) increase in out of area placements further from home, (ii) inappropriate inpatient placements; (iii) patients being unable to access specialist care required to support recovery; (iv) patients and carers/families having a poor experience; and (v) services falling below reasonable public expectations.	12	4	↔	19/11/21
1.6	Exec MD Primary Care & Community	Demand and capacity	16	12	↔	22/11//21

	Quality Committee	<p>Risk that the population's continuously changing need for service exceeds the Trust's capability and capacity to respond in a timely way. Where there are instances of demand outstripping supply, there is a risk that waitlists will grow, quality and safety of care will be compromised, the needs of the service users could be insufficiently met and this will lead to poorer health outcomes and experiences.</p> <p>This risk materialises from a number of factors that include changes in population characteristics and demographics, staffing and workforce challenges, service accessibility and user demand patterns, staffing and workforce challenges, legal and regulatory requirements, health and care system configuration, commissioning priorities (under commissioning and/or under investment), financial constraints, barriers to innovation and the need to respond to unexpected health emergencies (e.g. pandemic).</p>				11/11/21
2. People - Be a great place to work						
2.1	Chief People Officer PLC	<p>Workforce Planning</p> <p>Insufficient or ineffective planning for current and future workforce requirements (including number of staff, skill-mix and training) may lead to: impaired ability to deliver the quantity of healthcare services to the required standards of quality; and inability to achieve the business plan and strategic objectives</p>	16	9	↔	21/09/21 20/07/21
2.2	Chief People Officer PLC	<p>Recruitment</p> <p>A failure to recruit to vacancies could lead to: the quality and quantity of healthcare being impaired; pressure on existing staff and decreased resilience, health & wellbeing and staff morale; over-reliance on agency staffing at high cost/premiums and potential impairment in service quality; and loss of the Trust's reputation as an employer of choice.</p>	16	9	↔	21/09/21 21/10/21
2.3	Chief People Officer PLC	<p>Succession planning, organisational development and leadership development</p> <p>Failure to maintain a coherent and co-ordinated structure and approach to succession planning, organisational development and leadership development may jeopardise: the development of robust clinical and non-clinical leadership to support service delivery and change; the Trust becoming a clinically-led organisation; staff being supported in their career development and to maintain competencies and training attendance; staff retention; and the Trust being a "well-led" organisation under the CQC domain</p>	6	4	↔	21/09/21
2.4	Chief People Officer	<p>Developing and maintaining a culture in line with Trust values</p>	9	4	↔	21/09/21

	PLC	A failure to develop and maintain our culture in line with the Trust values and the NHS people promise which includes: being compassionate and inclusive, recognition and reward, having a voice that counts, health, safety & wellbeing of staff, working flexibly, supporting learning & development, promoting equality, diversity & inclusivity and fostering a team culture. The absence of which could result in; harm to staff; an inability to recruit and retain staff; a workforce which does not reflect Trust and NHS values; and poorer service delivery.				18/02/21
2.5	Chief People Officer PLC	Retention of staff A failure to retain permanent staff could lead to: the quality of healthcare being impaired; pressure on staff and decreased resilience, health & wellbeing and staff morale; over-reliance on agency staffing at high cost/premiums and potential impairment in service quality; and loss of the Trust's reputation as an employer of choice.	12	9	↔	21/09/21 20/07/21

3. Sustainability - Make the best use of our resources and protect the environment						
3.1	Exec MD for MH & LD Quality Committee	Failure of the Health and Social Care Place Based, Integrated Care Systems and Provider Collaboratives to work together Failure of the Health and Social Care Place Based, Integrated Care Systems and Provider Collaboratives in which we work to act together to deliver Transformation, the Long-Term Plan, integrated care, maintain financial equilibrium and share risk responsibly may impact adversely on the operations of the Trust and compromise service delivery.	16	9	↔	19/11/21 09/09/21
3.2	Director of Strategy & Partnerships Quality Committee	Governance of external partners Failure to manage governance of external partners effectively, could: compromise service delivery and stakeholder engagement; lead to poor oversight of risks, challenges and relative quality amongst partners; and put at risk the Trust's integrity, reputation and accountability to its stakeholders and credibility as a system leader and partner of choice.	9	9	↔	14/05/21
3.4	Director of Finance Finance & Investment	Delivery of the financial plan and maintaining financial sustainability Failure to deliver financial plan and maintain financial sustainability, including, but not limited to: through non-delivery of CIP savings; budget overspends; under-funding and constraints of block contracts in the context of increasing levels of activity and demand, could lead to: an inability to deliver core services and health outcomes; financial deficit; intervention by NHS Improvement; and insufficient cash to fund future capital programmes.	16	12	↔	03/11/21 18/01/22
3.6	Director of Corporate Affairs & Co Sec	Governance and decision-making arrangements	12	4	↑	22/11//21

	Audit Committee	Failure to maintain and/or adhere to effective governance and decision making arrangements, and/or insufficient understanding of the complexities of a decision may lead to: poor oversight at Board level of risks and challenges; (clinical or organisational) strategic objectives not being established or achieved; actual or perceived disenfranchisement of some stakeholders (including members of the Board, Governors and/or Members) from key strategic decisions; or damage to the Trust's integrity, reputation and accountability.				
3.7	Director of Finance Finance & Investment	Ineffective business planning arrangements and/or inadequate mechanisms to track delivery of plans and programmes Ineffective business planning arrangements and/or inadequate mechanisms to track delivery of plans and programmes, could lead to: the Trust failing to achieve its annual objectives and consequently being unable to meet its strategic objectives; the Trust being in breach of regulatory and statutory obligations.	12	6	↔	13/07/21 18/01/22
3.10	Executive Director for Digital & Transformation Finance & Investment	Protecting the information we hold Failure to protect the information we hold as a result of ineffective information governance and/or cyber security could lead to: personal data and information being processed unlawfully (with resultant legal or regulatory fines or sanctions), cyber-attacks which could compromise the Trust's infrastructure and ability to deliver services and patient care; data loss or theft affecting patients, staff or finances; reputational damage.	12	9	↔	14/05/21 18/01/22
3.11	Executive Director for Digital & Transformation Finance & Investment	Business solutions in a single data centre The Trust has an extensive amount of business solutions residing in a single data centre. Failure of that single data centre could result in a number of Trust IT systems becoming unavailable to staff, with the Trust having no direct control over the restoration of services.	12	4	↔	13/07/21 18/01/22
3.12	Director of Corporate Affairs & Co Sec	Business continuity and emergency planning Failure to maintain adequate business continuity and emergency planning arrangements in order to sustain core functions and deliver safe and effective services during a wide-spread and sustained emergency or incident, for example a pandemic, could result in harm to patients, pressure on and harm to staff, reputational damage, regulator intervention.	12	9	↔	28/10/21
3.13	Executive Director for Digital & Transformation	The Trust's impact on the environment	9	3	↔	13/07/21

	Finance & Investment	A failure to take reasonable steps to minimise the Trust’s adverse impact on the environment, maintain and deliver a Green Plan, and maintain improvements in sustainability in line with national targets, the NHS Long Term Plan and ‘For a Greener NHS’ ambitions (30%, 50% and 80% reduction in emissions by 2023, 2025 and 2030 respectively, and net zero carbon by 2040), could lead to: a failure to meet Trust and System objectives, reputational damage, loss of contracts, contribution to increased pollution within the wider community, and loss of cost saving opportunities.				21/09/21
4. Research & Education - Become a leader in healthcare research and education						
4.1	Chief Medical Officer	Failure to realise the Trust's Research and Development (R&D) potential Failure to fully realise the Trust's academic and Research and Development (R&D) potential may adversely affect its reputation and lead to loss of opportunity.	6	3	↔	12/11/21

Table 1a: Risk Rating Matrix

		Likelihood				
		1	2	3	4	5
		Rare	Unlikely	Possible	Likely	Almost certain
Impact/severity	5 Catastrophic	5	10	15	20	25
	4 Major	4	8	12	16	20
	3 Moderate	3	6	9	12	15
	2 Minor	2	4	6	8	10
	1 Negligible	1	2	3	4	5