

Report Title	Strategic Board Assurance Framework: Controls check			
Sponsoring Executive	Toby Lewis, Chief Executive			
Report Author	Barbara Anthony, Interim Head of Corporate Governance			
Meeting	Trust Board	Date	1 August 2019	

1. Suggested discussion points [two or three issues you consider the Board should focus on]

The SBAF risks held by the Trust Board are attached together with full details of the supporting controls, assurance processes and action plans to mitigate those risks. Details of the movement in each risk and the anticipated date when each target score will be achieved are also set out.

The committee is asked to review the action plans and assurance level of the controls for each risk on a bi-monthly basis. The assurance levels are zero, limited, adequate and substantial with definitions for each set out in this paper.

Confirm the reduction in risk score for SBAF 18 from 15 (red) to 9 (amber).

2. Alignment to 2020 Vision [indicate with an 'X' which Plan this paper supports]					
Safety Plan	X	Public Health Plan	х	People Plan & Education Plan	Х
Quality Plan	X	Research and Development	х	Estates Plan	x
Financial Plan	X	Digital Plan	X	Other [specify in the paper]	Х

3. Previous consideration [where has this paper been previously discussed?]

April Board Development Session, June Trust Board

4. Recommendation(s)

FIC is asked to:

a. CONSIDER, challenge and confirm the updated SBAF and amended process for the Board committees.

5. Impact [indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]							
Trust Risk Register	Risk Number(s): n/a						
Board Assurance Framework	Risk Number(s): 3, 7,18						
Equality Impact Assessment	Is this required? Y N x If 'Y' date completed						
Quality Impact Assessment	Is this required? Y N x If 'Y' date completed						

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to Trust Board: 1 August 2019

Strategic Board Assurance Framework: Controls check

1.0 INTRODUCTION

- 1.1 The Trust recently updated the risks in its Strategic Board Assurance Framework (SBAF) in April 2019 with the following review process:
 - Quarterly review at Board;
 - Bi-monthly reviews by each Board committee with an assigned risk;
 - Quarterly review by A & RM Committee Chair and Director of Governance.
- 1.2 Each responsible Board committee, when reviewing their assigned risks, will be required to confirm the assurance level (confidence level) of the effectiveness of the controls assigned to each risk <u>and</u> monitor/recommend actions required to improve the controls. Assurance levels will be measured against the following scale; zero, limited, adequate, substantial and included on the SBAF.

Assurance	Description					
Zero	Indicates poor effectiveness of controls					
Limited	Some assurances in place or controls are still maturing so effectiveness					
	cannot be fully assessed but should improve.					
Adequate	Some issues identified that if not addressed, could increase the likelihood					
	of the risk materialising.					
Substantial	Controls are suitably designed, being consistently applied and are					
	effective in practice.					

1.3 Trust Board is also asked to keep action plans under review.

2 **Board Summary**

- 2.0 The current risk ratings associated with each strategic risk are shown below on a heat map.
- **2.1** All risks have multiple identified controls in place to move the current risk score to the desired target score.

GP retention/recruitment (SBAF3)

2.2 It is anticipated that this risk will reduce to its target score by December 2020 and is presently scored as an amber risk.

- 2.3 The risk/action plan has been reviewed and updated by the Executive Lead, with actions focusing on accessing recruitment and retention data held by the CCG and commissioning a workforce study to be reported on in December 2019. The actions will provide foresight and visibility on the retention/recruitment figures, with the aim of developing controls to drive coordinated primary healthcare within the system.
- 2.4 No actions are due for completion this month.ICP vision (SBAF 7)
- 2.5 This risk is anticipated to reach its target score by the end of this financial year. It is presently scored as an amber risk.
- 2.6 This risk has been reviewed and controls reinforced, with a number of actions due to complete by September 2019. The actions focus on the development of the Response Plan which is scheduled to be presented to the Healthy Living Partnerships Board in September 2019 together with the development of partner risk levels identifying the level of risk that each partner is prepared to accept.
- **2.7** There are no overdue actions.

Midland Met commissioning risk (SBAF 18)

- 2.8 This risk is anticipated to reach its target score by the end of the financial year. The risk score has been reduced from 15 (red) to 9 (amber) following the decision of the West Birmingham GPs on 27 June 2019 to remain within the Sandwell and West Birmingham CCG footprint.
- 2.9 The assurance process to manage the Midland Met commissioning risk has been developed following this decision. The June 19 action to identify the assurance process is complete.
- **2.10** There are no overdue actions.

3.0 RECOMMENDATIONS

The committee is asked to:

a) CONSIDER, challenge and confirm the updated SBAF and assign assurance strength to the controls.

Barbara Anthony Interim Head of Corporate Governance 23 July 2019.

Heat map

	5	Almost Certain					
Likelihood	4	Likely					
	3	Possible			3,18	7	
	2	Unlikely					
	1	Rare					
L	1	1	Insignificant	Minor	Moderate	Major	Catastrophic
			1	2	3	4	5
			Consequence				