

The Whittington Hospital Board Assurance Framework

Strategic Objective	Risk Ref	Identified Risk	Current Risk	Change from last review	Target Likelihood	Target Consequence	Target Risk	Control Name	Board Assurance	Gaps in Controls	Gaps in Assurance	Outline Action Plan	Progress Update	Board Sponsor	Review Date or Action Plan Completion
Required	Required	Required (If..Then..)	Required		Required	Required	Required	Required	Only required for BAF Risk	Required but should say - "None"	Required but should say - "None"	Should be "NA"	Should be "NA"	Required	Required
Deliver high value care	W2.7	If the organisation cannot recruit or develop staff with specialist skills then it will be unable to deliver its contracted activity.	9	→	2	3	6	Workforce Development Plan Recruitment Policy	Annual Workforce Report	Workforce Development Plan needs to be updated	None	Update Workforce Development Plan		Maria Da Silva	01/04/2012
Deliver high value care	QG3.7	If the quality and performance indicators of the Trust Contract are not met (e.g. for ED waits, cancer waits) then patients may experience poor care and the Trust may be in breach of contract.	9	→	3	3	9	Semi Block Contract	Performance Reports Patient Surveys	None	None	NA	NA	Maria Da Silva	01/04/2012
Deliver high value care	QG3.5	If the organisation has insufficient evidence for the implementation of Quality Strategy then it will not meet Monitor's requirement for FT status.	9	→	3	2	6	Quality Strategy	Internal Audit review of Quality Account Audit Commission review of Quality Account	No Quality Strategy A wide variation in quality measures and plethora of quality benchmarks from	None	Draft Quality Strategy to be reviewed in November Quality Strategy Group. Development of Consultant Ward Rounds and Review of Work Plans, Culture Development (Physicians)		Celia Ingham Clark	01/04/2012
Deliver high value care	FP2.3	If insufficient time is given to deliver pathway changes (CIP program) then the efficiency savings/quality improvement will not be achieved before FT assessment.	9	→	2	3	6	QIPP Programme CIP Workforce Development Plan	QIPP Programme Reports Chief Executive Report	Inadequate Service Transformation and Benchmarking costs	None	All sections are required to produce an Action Plan to achieve 90% compliance.		Maria Da Silva	01/04/2012
Deliver high value care	FP3.1	If "service line management" is not fully implemented then the organisation may not be able fully to implement its strategy or meet its performance targets.	9	→	2	2	4	QIPP Programme	QIPP Programme Reports	There is inadequate clarity on the "leads" for leading this initiative.	None	Confirm leads for each specific QIPP component at Dec 7th meeting and that accountability will be via the QIPP Board		Richard Martin	01/04/2012
Deliver high value care	FP3.2	If information is inconsistent, poorly recorded or cannot be analysed then the organisation cannot compare performance against benchmarks.(eg Child Protection activity)	16	↓	2	2	4	Information Strategy Community Contract Rio Data Collection	Monthly Performance Reports	There is no overall Information Strategy but rather a collection of policies (eg Data Quality, Info Life Cycle.)	None	Produce an Information Strategy		Richard Martin	01/04/2012
Deliver high value care	FP4.1	If GPs are not incentivised to engage in service delivery then the organisation cannot achieve top quartile performance in Bundle tariff services.	9	→	2	2	4	GP Engagement Strategy	Monthly Performance Reports	Undeveloped GP Engagement Strategy	None	Engagement with CCG's		Dr Greg Battle	01/04/2012
Deliver high value care	FP5.1	If cost pressures on partner organisations results in increased unfunded referrals then the organisation will not achieve financial and quality targets.	9	→	3	3	9	Partner Engagement Strategy	Monthly Performance Reports	None	None	NA	NA	Siobhan Harrington	01/04/2012
Deliver high value care - Ensure patient safety	QG5.3	If CIP programmes are implemented in a way that reduces service quality, then patients may suffer and the organisation will not achieve its strategic objectives.	9	→	3	3	9	CIP Target Plan Quality Strategy	CQC Registration CIP Performance Plan	None	None	NA	NA	Celia Ingham Clark	01/04/2012
Deliver high value care - Ensure patient safety	P1.3	If infection control is inadequate then patients will be harmed and the Trust will not achieve its targets. (esp. for MRSA, E-coli, C-Diff).	6	→	2	2	4	Infection Control Policy	Infection Control Reports HPA Monthly Returns	Staff & Visitor compliance with hand hygiene.	None	Development of more more effective communication on hand hygiene.		Bronagh Scott	01/04/2012
Improve health of local people	QG5.4	If patient experience is poor (e.g. in Maternity), then patients will choose to go elsewhere.	6	→	3	2	6	Quality Strategy	Patient Surveys	None	None	NA	NA	Celia Ingham Clark	01/04/2012
Improve health of local people	QG5.5	If Trust is unable to respond to a large-scale emergency, then patients may be harmed.	6	→	2	3	6	Emergency Plan	Emergency Test Plan Results	None	None	NA	NA	Maria Da Silva	01/04/2012

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Improve health of local people	QG5.6	If The the organisation is unable quickly to re-establish business continuity following a major service interruption (e.g. fire), then patients may be harmed and the organisation	6	➔	2	3	6	Business Continuity Plan	Business Continuity Plan Test Results	None	None	NA	NA	Maria Da Silva	01/04/2012
Improve health of local people	QG2.3	If GPs, commissioners and others do not fully support the transformation (including implementation of the integrated care strategy), then the organisation will not be able to become an ICO and FT.	9	➔	2	3	6	QIPP Programme FT Programme Practioner Engagement	QIPP Programme Reports FT Programme Reports	Practitioner engagement does not have a formalised plan.	None	Development of formalised engagement with CCG's Development of relationship with Primary Care Medical Director Primary Care Engagement in redesign		Fiona Smith	01/04/2012
Improve health of local people	QG3.2	If there is adverse media attention (especially in sensitive areas such as Haringey Childrens Services), then the organisation will experience reputational damage.	12	➔	3	4	12	Communications Strategy PPI Strategy	Patient and Stakeholder Experience Feedback	None	None	NA	NA	Siobhan Harrington	01/04/2012
Improve health of local people	FP1.4	If demand falls for any reason (e.g. activity reductions as a result of AQP, changes in investment/QIPP assumptions), then the organisation may not be able to meet its financial targets.	4	➔	2	2	4	Semi Block Contract. SLA Process Governed by National Rules and Arbitration process. Trust Health Strategy	Contract Negotiation Report Update on Trust Health Strategy	Trust Health Strategy in Draft	None	Complete Trust Health Strategy		Fiona Smith	01/04/2012
Culture of innovation and improvement	W1.3	If staff across all sites are not fully engaged in the transformation, or if there is Trade Union resistance, then there will be delays in implementation.	9	➔	3	3	9	QIPP Programme Partnership Agreement	Partnership Agreement	None	None	NA	NA	Maria Da Silva	01/04/2012
Culture of innovation and improvement	QG1.1	If there is insufficient funding or resources to implement new improvement methodologies (such as lean) then the organisation may fail to transform services.	6	➔	2	3	6	QIPP Programme Unipart Program Business Plan	QIPP Board Performance Report Performance Dashboard Finance Report	None	None	NA		Richard Martin	01/12/2011
Culture of innovation and improvement	W2.2	If insufficient priority is given to staff to complete their training then the organisation will not comply with the mandatory training regulations.	16	⬇	2	3	6	Workforce Development Plan Mandatory Training Policy	Monthly Training Reports	Mandatory Training Policy is not being implemented.	None	All sections are required to produce an Action Plan to achieve 90% compliance.		Maria Da Silva	31/12/2012
Culture of innovation and improvement	W3.4	If the quality of the clinical teaching is not excellent then the commissioners may not renew teaching contracts.	9	➔	3	3	9	Clinical Teaching Strategy	Annual Clinical Teaching Report Award of SIFT	None	None	NA	NA	Dr Yi Mien Koh	01/04/2012
Deliver high value care - Sustainable and effective organisation	P1.2	If financial targets are not met then organisation unable to become a Foundation Trust.	4	➔	2	2	4	SFIs Capital Planning Performance Man. CIP Programme	Monthly Finance Reports Internal & External Audit	None	None	NA	NA	Richard Martin	01/04/2012
Deliver high value care - Sustainable and effective organisation	P1.5	If capital funding is not available (e.g. for Maternity and IT upgrades), then the Trust may not be able to meet its strategic goals.	16	⬇	3	3	9	Capital Programme	Capital Programme Report	None	None	NA	NA	Richard Martin	01/04/2012
Deliver high value care - Sustainable and effective organisation	QG5.2	If statutory legislative requirements are not met with the property transfer from previous organisations then patients/staff may be harmed and the organisation receiving enforcement notices.	12	➔	3	3	9	NCL Business Transfer Agreement. Estates Policy	Monthly Estates Report to Exec team. Estates Due Diligence Report November 2011	Poor compliance by NCL with BTA and poor communication with NCL	None	NCL have appointed an estates strategy manager & contractor.		Maria Da Silva	01/04/2012
Deliver high value care - Sustainable and effective organisation	QG3.8	If the organisation is unable to demonstrate compliance with Monitor's standards for Board capability and governance processes, then it will not be granted FT status.	6	➔	3	2	6	FT Programme Board Development Programme AFTAF & TFA*	FT Programme Reports Self Assessments External Assessments Internal Audit Report	None	None	NA	NA	Fiona Smith	01/04/2012

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Deliver high value care - Sustainable and effective organisation	FP5.2	If we are unable quickly to recover from an IT disaster, then patients may suffer and the organisation may not be viable.	6	→	2	3	6	IT Strategy	Performance Reports	None	None	NA	NA	Glenn Winteringham	01/04/2012
Deliver high value care - Sustainable and effective organisation	FP5.3	If there are persistent lapses in information governance, then the organisation will be failing in its statutory obligations.	6	→	2	3	6	Information Governance Plan	Information Governance Registration	None	None	NA	NA	Glenn Winteringham	01/04/2012
Deliver high value care - Sustainable and effective organisation	FP1.2	If there is insufficient cost control then the organisation will fail to meet statutory financial duties.	9	→	3	3	9	SFIs - Annual Budget Monthly Budget Reports QIPP Programme	External Audit Report. QIPP Programme Reports	None	None	NA	NA	Richard Martin	01/04/2012

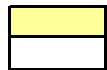
Key Acronyms - *

AFTAF	Aspiring Foundation Trust Assurance Framework
MH	Mental Health
TFA	Tripartite Formal Agreement (Trust, DH, NHS London)

Risk Reference Numbers

If you need to add a new Risk to the BAF, it will need a Reference Number. Please add select a Risk Number by adding a Risk to one of the columns below. (Do not worry which column inside a block to which you add your risk!)

Finance & Productivity				Performance		Quality & Governance					Workforce		
FP1.1	FP2.1	FP3.1	FP5.1	P1.1	P2.1	QG1.1	QG2.1	QG3.2	QG4.1	QG5.2	W1.1	W2.1	W3.1
FP1.2	FP2.3	FP3.2	FP5.2	P1.2	P2.2	QG1.4	QG2.2	QG3.3	QG4.3	QG5.3	W1.2	W2.2	W3.3
FP1.3	FP2.4		FP5.3	P1.3	P2.3		QG2.3	QG3.5		QG5.4	W1.3	W2.6	W3.4
FP1.4				P1.4				QG3.6		QG5.5	W1.5	W2.7	
				P1.5				QG3.7		QG5.6			
								QG3.7					
								QG3.8					



Guideline for grading the severity and the risk rating of the potential risk of the incident

To be discussed!!!!!!!!!!

Jo Silcock

Descrip-tor	Potential Impact on individual / family members, visitor, contractor, staff	Number of persons affected at one time	Potential impact on organisation	Financial Impact/Complaint Litigation
Grade 1: No Harm (Insignificant)	Negligible e.g. no obvious harm	Not applicable	No risk to the Trust. No impact on service. No impact on environment.	Theft/loss up to £1,000. Complaint unlikely Litigation risk remote Financial impact on service < £100.
Grade 2: Low Harm (Minor)	Minor harm / injury Non permanent harm. First aid required. Minor injury or Minor illness up to 1 month. Increased length of stay 1-7 days or increased level of care 1-7 days.	Very few 01-Feb	Minimal risk to Trust. Slight impact on Service. Slight impact on environment.	Litigation <£50k. Theft/loss between £1k-£5k Financial impact on service £100-£5k Complaint possible.
Grade 3: Moderate Harm	Moderate harm / injury Medical treatment required. Semi permanent harm up to one year. Increased length of stay 8-15 days or increased length of care 8-15 days.	Small numbers 3-5	Some service disruption. Potential for adverse publicity avoidable with careful handling. Moderate impact on environment.	Litigation possible £50k-£500k Theft/loss between £5k-£25k Financial loss to service between £5k - £100k. Complaint expected.
Grade 4: Major Harm (Severe)	Significant / Major harm / extensive injury – reportable Major permanent harm / Permanent incapacity. Major Clinical intervention required. Increased length of stay >15 days or increased level of care >15 days loss of capability.	Moderate numbers 16-50 eg. lost specimens. Numbers of patients affected by an event.	Service restriction. Impact of reputation. Major impact on environment. Adverse publicity major local media exposure.	Litigation £500k-£1million. Theft/loss between £25k - £200k. Financial impact to service between £100k - £5million.
Grade 5: Catastrophic (Death)	Death	More than 50 people affected by an event	National Media interest. Sever loss of confidence in Trust.	Litigation >£1million. Theft loss over £200k

			Extensive injuries or increased length of stay >15 days or increased level of care >15 days loss of capability	Financial impact to service >£5million.
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Severity /
Consequences:

Likelihood

This reflects the probability of the risk / incident happening again.

Level	Likelihood rating	Description
1	Rare	Can't believe that this will ever happen again.
2	Unlikely	Do not expect it to happen again but it is possible.
3	Moderate/Possible	May recur occasionally.
4	Likely	Will probably, but it is not a persistent issue.
5	Almost Certain	Will undoubtedly recur, possibly frequently.

Risk Matrix

This is used to calculate the risk rating i.e. Severity X Likelihood:
(Source: NPSA: www.npsa.nhs.uk)

		Severity (Consequence)				
		1	2	3	4	5
Likelihood	1	1	2	3	4	5
	2	2	4	6	8	10
	3	3	6	9	12	15
	4	4	8	12	16	20
	5	5	10	15	20	25

Grading of Risk

Colour code	Risk rating	Descriptor
Green	1 -4	Very Low risk
Yellow	5 -6	Low risk
Orange	8 -12	Moderate risk
Red	15 - 25	High risk

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