



Report to:	Integrated Care Board
Date of Meeting:	13 July 2022
Subject:	Board Assurance Framework
Director Sponsor:	Executive Director of Corporate Affairs
Author:	Corporate Affairs Team

STATUS OF THE REPORT: *(Please click on the appropriate box)*

Approve Discuss Assurance Information A Regulatory Requirement

SUMMARY OF REPORT:

NHS Humber and North Yorkshire Integrated Care Board (ICB) has a statutory and regulatory obligation to ensure that systems of control are in place to minimise the impact of all types of risk, which could affect patients, staff, public resources, and the function of the ICB. This includes both the risk to the organisation and the risk to those individuals to whom the ICB owes a duty of care.

The Board Assurance Framework (BAF) provides the organisation with a simple but comprehensive method for the effective and focused management of the principal risks that may impede or assist in the ICB in meeting its strategic objectives and statutory obligations. The BAF serves as the key document to assure the Board that risk management is firmly embedded in the organisation. One of the primary purposes of the Board Assurance Framework is to identify gaps in control or assurance in relation to these principal risks. It also provides a structure for the evidence to support the Annual Governance Statement. This simplifies Board reporting and the prioritisation of action plans which, in turn, allow for more effective performance management.

During the transition to the Integrated Care Board and in a development session of the shadow Board, members were given the opportunity to consider the strategic objectives of the ICB as set out in appendix A and identify what they felt were the principal risks that could impact on the achievement of those objectives.

This report presents in appendix B the initial output of the consideration of the strategic objectives and the principal risks to achievement.

We will continue to iterate the BAF as the Board develops over the coming months. This will include coming back to the Board with the controls and mitigation that provides the assurance and evidences the internal controls are in place, that operate effectively and that our objectives are achieved.

The BAF will be designed to ensure that there are clear links between the governance responsibilities of the Board, the lines of accountability across the Executive Directors, and the assurance activities of the Board's Governance Committees. The Audit Committee will oversee the development of the wider risk management strategy and framework of which the BAF will be an element. The Audit Committee will also maintain oversight of the development of the BAF.



RECOMMENDATIONS:

Members are asked to:

- i) Consider and approve the strategic risks identified in appendix B
- ii) Note that a further iteration will be developed to include the controls and mitigations
- iii) Note that Audit Committee will maintain oversight of the development of the BAF and provide assurance to the Board.

ICB STRATEGIC OBJECTIVE *(please click on the boxes of the relevant strategic objective(s))*

Realising our vision	<input checked="" type="checkbox"/>
Improving outcomes in population health and healthcare	<input checked="" type="checkbox"/>
Supporting broader social and economic development	<input checked="" type="checkbox"/>
Tackling inequalities in outcomes experience and access	<input checked="" type="checkbox"/>
Delivering our operational plan 2022/23	<input checked="" type="checkbox"/>
Developing our ICS	<input checked="" type="checkbox"/>

IMPLICATIONS *(Please state N/A against any domain where none are identified)*

Finance	There are no financial implications arising directly from the BAF, it will form part of the mitigation and ensuring we meet our objectives.
Quality	There are no quality implications arising directly from the BAF, it will form part of the mitigation and ensuring we meet our objectives.
HR	There are no HR implications arising directly from the BAF, it will form part of the mitigation and ensuring we meet our objectives.
Legal / Regulatory	There are no legal implications arising directly from the BAF, it will form part of the mitigation and ensuring we meet our objectives.
Data Protection / IG	There are no information governance implications arising directly from the BAF, it will form part of the mitigation and ensuring we meet our objectives.
Health inequality / equality	There are no inequality or equality implications arising directly from the BAF, it will form part of the mitigation and ensuring we meet our objectives.
Conflict of Interest Aspects	No conflicts of interest have been identified.
Sustainability	There are no sustainability implications arising directly from the BAF, it will form part of the mitigation and ensuring we meet our objectives.

ASSESSED RISK:

The ICB has a statutory and regulatory obligation to ensure that systems of control are in place to minimise the impact of all types of risk.

The BAF is part of the mitigation in terms of the management of the principal risks and forms a core part of the risk management framework.



MONITORING AND ASSURANCE:

The Board will receive the Board Assurance Framework in public at each of its meetings, the Audit Committee will also receive the BAF at each of its meetings.

ENGAGEMENT:

Not applicable

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No Yes

If yes, please detail the specific grounds for exemption



Appendix A - NHS Humber and North Yorkshire Integrated Care Board Strategic Objectives

Realising our vision	Improving outcomes in population health & healthcare	Tackling inequalities in outcomes, experience & access	Supporting broader social and economic development	Delivering our operational plan 2022/23	Developing our ICS
<p>Deliver a system strategy setting out our ambitions for 2022-2027 as outlined below :</p> <p>Starting life well</p> <ul style="list-style-type: none"> • Improve health outcomes for children (2022/23 goals to be attached) • Reduce infant mortality • Ensure children are safe from harm • Ensure the opportunity to thrive is available to all children - leaving no one behind • Ensure strong links and active support in the implementation of the Supporting Families programmes in H&NY <p>Living well</p> <ul style="list-style-type: none"> • Change the conversation so our people focus on health as an asset rather than ill health as a burden • Vigorously promote national/local policies that support everyone's opportunities for a healthy life • Take differential action to address variations in people's opportunities for a healthy life • Promote strategies that enable digital self-management and personalised care especially for those in our communities with long term conditions • Improve uptake in lifestyle services: the Diabetes prevention programme/Low Calorie Diets/Digital weight management programme. <p>Aging Well</p> <ul style="list-style-type: none"> • Ensure delivery of the NHS aging well programme through the community and care collaborative and place based integrated teams • Improve NHS care in care homes • Promote and sponsor proactive support to older people living with frailty in the community • Ensure consistent implementation of an enhanced rapid community response for older people at times of crisis <p>Ending Life Well</p> <ul style="list-style-type: none"> • Ensure consistent and comprehensive implementation of the national framework for 'Ambitions for Palliative and End of Life Care ' 2021-26 	<ul style="list-style-type: none"> • Strengthen our engagement and participation so that the voices of people with lived experience influence all our population health strategies and plans • Roll out the next phase of ICS population health programme to a minimum of 6 PCNs (one in each place) with a focus on interventions that improve outcomes for those groups most at risk. • Put in place the systems, skills and data safeguards to meet the national requirement for the ICS to have the technical capability to deliver population health management from April 2023. • Deliver the ICS Tobacco and smoking cessation programme • Prioritise and support Drugs and Alcohol and Obesity plans and programmes • Deliver progress against the NHS Long Term Plan high impact actions supporting stroke and cardiac care • Reduce antibiotic use in primary and secondary care 	<ul style="list-style-type: none"> • Develop a strategy 2022-2032 that enables all people in Humber & North Yorkshire to live longer healthier lives • Tackle health inequalities in our coastal communities by delivering a robust strategy and plan to improve outcomes in these communities. • Address the stark inequalities for children identified in Northern Health Science report 'The Child of the North : Building a fairer future after COVID 19' • Reduce inequalities in access to public health screening and immunisation services • Deliver Core20PLUS5 (<i>the most deprived 20% of the national population as identified by the Index of Multiple Deprivation</i>) for the Humber and North Yorkshire population. • Deliver The PLUS 5 clinical 2022/23 programmes : <ul style="list-style-type: none"> • Maternity/Severe Mental Illness/Chronic Respiratory disease/Early cancer diagnosis/Hypertension 	<ul style="list-style-type: none"> • Advocate, campaign and invest in levelling up Humber and North Yorkshire • Use the national strategy/purpose coalition levelling up goals and support, to produce a levelling up strategy for Humber and North Yorkshire Health and Care Partnership • Deliver our Anchor network strategy and plan 22/23 • Align ICS development and associated operating models with local Government devolution in North Yorkshire and York and prepare to align with the Hull and East Riding devolution as it develops • Deliver climate change and net zero targets 2022/23 • Participate proactively in Opportunity Humber • Oversee the delivery the next phase of the Humber Acute Service review 	<ul style="list-style-type: none"> • Ensure that the quality of services to our patients is paramount in service delivery, planning and system development • Systematically adopt new models of care and new ways of working that enable services to transform • Invest in our workforce and deliver our people plan 2022/23 with a specific focus on creating 'one workforce' • Continue to respond to COVID 19 • Support the Acute collaborative to deliver 2022/23 targets to reduce elective backlog, reduce long waits and improve cancer waiting times • Support the Acute Collaborative to improve the responsiveness of urgent and emergency care services • Support the Community and Care collaborative to transform and build community services capacity to deliver more care at home improve/discharge • Support the primary care collaborative to improve access to primary care - expand capacity and increase appointments • Support the Mental Health and Learning Disability to grow and improve mental health services and services for people with learning disability • Exploit digital technology to transform care for patients and deliver our Digital plan 2022/23 • Deliver financial plan 2022/23 including productivity, efficiency and capital requirements • Deliver a 'leading edge communications and engagement strategy and plan to support the aims and ambitions of the ICS. 	<ul style="list-style-type: none"> • Complete the transition from the existing CCG arrangements to the new ICS by July 22 • Establish the ICB including full membership and governance processes by July 22 • Establish the Integrated Care Partnership core membership by July 22, and governance processes by October 22. • Establish the ICB including full membership and governance processes by July 22 • Establish a wider ICS Assembly by October 22 • Ensure effective operating arrangements are established in our 6 places, 4 provider collaboratives, strategic partnerships from July 22 • Establish the ICS infrastructure including executive teams & support services by August 22 • Design & develop an OD Programme including respectively the ICB, the ICP, the wider assembly and the staff of the ICS by October 22 • Design and develop a talent management framework across all partners, supporting system succession planning, by December 22 • Establish a system-wide recruitment approach, One Workforce, across the ICS by September 22 • Build a strong partnership with the Healthwatch collaborative and using their insight and research in support of the aims of the ICS. • Establish ICS Headquarters by December 22 • Continue to develop our Improvement, Research and Innovation System (IRIS) in partnership with our Universities, Further Education Institutions and wider academic community regionally & nationally. • Ensure that our ambition to be the leading ICS for clinical and professional leadership and development is further strengthened • Implement a revised Primary Care Strategy for 2021/22 focusing on strengthening PCNs, primary care at scale and creating capacity for PCN leadership development • Continue to support the development of the VCSE through implementation of the VCS Strategy 2022/23 and through further investment in the sector. • Participate in the 4into1 Northeast and Yorkshire Regional Development programme • Maintain profile as an influential & mature ICS

Appendix B – Board Assurance Framework Draft Principal Risks

Principal Risk Ref	Principal Risk	Executive Director Lead
Strategic Objective – Realising our vision, improving outcome in population health & health care and delivering our operational plan		
PR1	There is a risk that we fail to create a culture which supports transformation of services and address health inequalities which leads to no improvement or a deterioration in outcomes for our population	Chief Operating Officer / Executive Director Clinical and Professional
Strategic Objective – Tackling inequalities in outcomes, experience and access and delivering our operational plan		
PR2	There is a risk that we fail to prioritise quality and seek improvement in patient care which leads to poorer outcomes, experience and access to care	Executive Director Nursing & Quality
Strategic Objective - Delivering our operational plan		
PR3	There is a risk that we fail to build a workforce suitable to meet the future needs which leads to no or limited transformation of services	Executive Director People
PR4	There is a risk that we fail to achieve system financial balance and there is no improvement in productivity and value for money	Executive Director Finance and Investment